

# GIRL SCOUT CAMP-INS

## 2009-2010 REGISTRATION FORM

[www.davinci-center.org](http://www.davinci-center.org)

DA VINCI  
**SCIENCE  
CENTER**  
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Date of Camp-In \_\_\_\_\_ Name of Camp-In Program \_\_\_\_\_

Troop # \_\_\_\_\_

Name of Group Leader Attending Camp-In \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Day) \_\_\_\_\_ Phone (Evening) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Secondary Contact Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Day) \_\_\_\_\_ Phone (Evening) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Total Number of Scouts \_\_\_\_\_ Total Number of Adults \_\_\_\_\_

Number of Scouts Without Membership \_\_\_\_\_ @ \$45.00 each = \$ \_\_\_\_\_

Number of Scouts With Membership\* \_\_\_\_\_ @ \$40.00 each = \$ \_\_\_\_\_

One (1) Leader Per Group \_\_\_\_\_ @ FREE = \$ \_\_\_\_\_

One (1) Co-Leader Per Group \_\_\_\_\_ @ FREE = \$ \_\_\_\_\_

Additional Chaperones Required for 1:5 Adult-to-Scout Ratio \_\_\_\_\_ @ FREE = \$ \_\_\_\_\_

Number of Adults Without Membership \_\_\_\_\_ @ \$35.00 each = \$ \_\_\_\_\_

Number of Adults With Membership\* \_\_\_\_\_ @ \$30.00 each = \$ \_\_\_\_\_

*\* Members must submit photocopy of their membership card with registration form.*

**Total Payment Due** \$ \_\_\_\_\_

**Deposit (25%) Due Upon Registration** \$ \_\_\_\_\_

**Balance - DUE 30 DAYS Before Camp-In** \$ \_\_\_\_\_

Payment Method \_\_\_\_\_ Check (payable to "Da Vinci Science Center")

\_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

Name on Card (Print) \_\_\_\_\_

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

For registration information, call 484.664.1002, Ext. 129. For program information, call 484.664.1002, Ext. 110.

**3145 Hamilton Blvd. Bypass, Allentown, PA 18103 ▶ Phone/Fax 484.664.1002 ▶ [www.davinci-center.org](http://www.davinci-center.org)**