

## Association II: Southern Alabama Trails Day Camp

**Date:** Monday-Friday, June 15 -19

**Time:** Monday-Thursday, 9 a.m. – 2 p.m.

Friday, 9 a.m. – 4 p.m.

**Place:** Mobile Botanical Gardens on Museum Drive

**Cost:** Brownies — Juniors Girl Scouts \$30 (T-shirt included)

Older Girl Scouts \$20 (T-shirt included)

Non-Association II: \$35

*Day Camp is run ONLY with Volunteer Leadership. If you are an approved adult leader, Please consider volunteering for this week with the girls in a wonderful outdoor experience! Call the Council and leave your name and phone number.*

### Check Off List

1. Registration Form sent in on time
2. Permission form
3. Check payable to: Girl Scouts of Southern Alabama
4. List of all current level Badges Earned

Please note that all of the above needs to be completed in order to process your registration for Day Camp.

Refund Policy: No refunds.

### *What to Bring*

Plastic drinking cup with handle

Bag Lunch and drink

Hat

Shorts & T-shirt (no sleeveless tops)

Above the ankle socks & sneakers (no sandals)

Space is only available depending on the amount of Volunteer Leadership

\*\*\*\*\*Keep This Part for your information\*\*\*\*\*

## Registration Form

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

School \_\_\_\_\_ Grade Fall '09 \_\_\_\_\_

Leader's Name \_\_\_\_\_ Troop# \_\_\_\_\_

Buddy Attending Camp with \_\_\_\_\_ Age \_\_\_\_\_

Check T-shirt Size: (adult sizes) \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL

Please list current level badges or try-its earned: ON BACK!

### Association II Southern Alabama Trails Day Camp Permission Form

My daughter, \_\_\_\_\_, has my permission to participate in the Association II Southern Alabama Trails Day Camp, June 15-19, 2009. She is in good physical condition and has not had any serious illness or operation since her last health examination. She has my permission to be treated by the camp health supervisor and by a physician if needed.

During the activity, I may be reached at: Address \_\_\_\_\_

Phone # \_\_\_\_\_

If I cannot be reached in case of an emergency, the following person is authorized to act in my behalf:

Name \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_

Relation to Camper \_\_\_\_\_

Physician's Name: \_\_\_\_\_

**Mail to: Assoc. II Day Camp**  
Girl Scouts of Southern Alabama  
3483 Springhill Ave.  
Mobile, Alabama 36608

