

SAGTIKOS DISTRICT WINTER CAMPOREE

“APOCALYPSE”



DATE: JANUARY 25, 2019 – JANUARY 27, 2019

LOCATION: BAITING HOLLOW SCOUT CAMP

REGISTRATION FEE: \$15.00 PER PERSON OR \$50.00 PER UNIT “HOLD A SPOT” DEPOSIT

REGISTRATION IS VERY IMPORTANT FOR THIS EVENT! **No REFUNDS!!!** PLEASE MAIL YOUR \$50.00 DEPOSIT **OR** YOUR PRE-PAID TOTAL TO: SUFFOLK COUNTY COUNCIL, BSA, 7 SCOUTING BLVD., MEDFORD, NY 11763, ATTN: KIMBERLY RUSSELL

THE CABIN DRAWING WILL BE AT THE JANUARY 8TH ROUNDTABLE MEETING. **TO BE CONSIDERED FOR A CABIN A \$50.00 DEPOSIT MUST BE RECEIVED AT THE COUNCIL SERVICE CENTER BY NO LATER THAN FRIDAY, DECEMBER 21ST. YOU MUST BE PRESENT AND PREPARED TO PAY IN FULL FOR THE CABIN AT ROUNDTABLE TO BE IN THE DRAWING FOR THE CABIN.** FEES FOR CABINS RANGE FROM \$75 TO \$150 (SEE NEXT PAGE). EACH UNIT WILL PROVIDE 1 PERSON WHO WILL BE THE CAMPOREE UNIT COORDINATOR FOR THEIR UNIT AT THE WINTER CAMPOREE. THIS PERSON WILL DEDICATE THEMSELVES TO ASSISTING AT THE EVENT & THEY CANNOT BE THE SCOUTMASTER OR SPL. A LEADER’S GUIDE WILL BE PROVIDED SHORTLY FOR THE WINTER CAMPOREE. THE WINTER CAMPOREE IS OPEN TO ALL TROOPS, & CREWS ONLY.

ANY QUESTIONS - CONTACT RAY COYLE AT 631-806-0601, EMAIL BSATROOP179@AOL.COM; MIKE DELLI GATTI AT 631-495-3632, EMAIL MICHAELDELLIGATTI@MSN.COM.

SAGTIKOS DISTRICT WINTER CAMPOREE – 1/25/19 – 1/27/19

UNIT # _____ DISTRICT _____ UNIT COORDINATOR _____

CONTACT: _____ POSITION _____ CELL #: _____

EMAIL: _____ CABIN DEPOSIT \$ _____ (\$50.00)

NUMBER OF SCOUTS _____ x \$15 NUMBER OF ADULTS _____ x \$15 = _____ TOTAL ENCLOSED \$ _____

Boy Scouts of America
Suffolk County Council
Sagtikos District



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Winter Camporee Cabin Request Form - 2019

TROOP /CREW #: _____

SCOUTMASTER: _____

TELEPHONE NUMBER: _____

_____ Training Lodge (20+ people) \$150.00

_____ Penataquit Cabin (20 people) & Boat House (18 people) \$100.00

_____ Shinnecock Cabin (12 people) & Tuocs (people 16) \$75.00

- **NOTE: A CHECK FOR CABIN FEE MUST BE ATTACHED AND WILL BE RETURNED IF YOU DO NOT WIN A CABIN IN THE LOTTERY.**
- **PLEASE INDICATE WHICH CABIN YOU WOULD PREFER.**
- **CABINS SUBJECT TO CHANGE**

Please note: fees paid toward Council and District camping events are non-refundable and non-transferable unless the event is cancelled due to unforeseen circumstances.

FOR OFFICE USE ONLY!

CABIN WON _____

IF NOT DATE CHECK RETURNED _____

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