



CAMP PROGRAM REFUND REQUEST

This form is to be used when requesting a refund for council sponsored camp programs only.
It is NOT to be used for weekend cabin or campsite reservations at BHSC.

Is your request for a:

- Cub Scout program?
 - Winter Day Camp
 - Spring Day Camp
 - Summer Day Camp – Baiting Hollow
 - Summer Day Camp – Cub Adventure
 - Summer Cub Scout Resident Camp
- Boy Scout Program?
 - Winter Camp
 - Spring Camp
 - Summer Day Camp
 - Summer Rising Sun Camp
 - Summer Specialty Camp – Please tell us which one: _____

Dates Enrolled: _____

Scout Name: _____

Parent Name: _____

Daytime Phone Number: _____

Reason for Request: _____

Parent Signature: _____ Date : _____

Completed forms should be mailed to: Camping Director, Baiting Hollow Scout Camp, 1774 Sound Avenue, Calverton, NY 11933 or faxed to 631-727-6323. No refund requests will be accepted after September 9th. All refund requests will be reviewed by our Council Camping Committee at their next scheduled meeting. Refunds for Summer Programs will be made by September 15th.

