

LODGE OA FAMILY BANQUET REGISTRATION FORM – Melhorn Manor, 977 West Main Street, Mount Joy, PA 17552, Feb. 17, 2018

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Date of Birth: _____ Troop # _____
 Email: _____

☐ I will be attending the Lodge Family Banquet and I am placing an order for the following tickets:

Type of Ticket	Cost Each	Quantity	Total Per Ticket Type
Adults and Children over 10:	\$25.00	x	=
Children (Age 4 –10)	\$15.00	x	=
Children (Under 3)	Free	x	= No Charge
TOTAL AMOUNT ENCLOSED			

LODGE FELLOWSHIP & SERVICE WEEKEND – Camp Mack, Fri., April 27 thru Sun., April 29, 2018

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Date of Birth: _____ Troop # _____
 Email: _____

Chapter (please circle one): Allowat Nenajunges (Horseshoe Trail District) Tgauchsu Sipo (Conestoga River District) Wuliken (Harvest District)

I will be attending the weekend as a (check the appropriate box):

- ☐ I will be attending the Vigil Breakfast (Vigil Members Only)..... \$20.00
- ☐ I will be attending the weekend as a Lodge Member..... \$20.00
- ☐ Check here if you have any food allergies (please list in the blank area on the right side of this form)
- ☐ I WILL be staying for Sunday Breakfast ☐ I WILL NOT be staying for Sunday Breakfast

A parent or guardian must sign this release if you are under 18 years of age. If you are 18 years old or older, please sign your own name.

I give permission for full participation in the BSA/OA program listed above. IN CASE OF EMERGENCY, I understand every effort will be made to contact me (if participant is an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the licensed health care practitioner selected by the Adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery or injections of medication for my child (or for me, if participant is an adult).

 Signature of Parent/Guardian or Adult

 Date

2018 NE-6B SECTION CONCLAVE – Camp Bashore, Fri., June 1 thru Sun., June 3, 2018

☐ Sign me up for the 2018 Section Conclave. Enclosed is my \$45 Conclave registration fee. All Lodge members, whether serving on staff or a member of our contingent need to pay the Conclave fee.

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Date of Birth: _____ Troop # _____
 Email: _____

I am a (please circle one): Ordeal Member Brotherhood Member Vigil Member

T-Shirt Size (circle one): M L XL XXL XXXL (**If you are ordering an XXL or XXXL shirt, your Conclave registration fee is \$47*)

☐ Check here if you have any food allergies (please list in the blank area on the right side of this form)

A parent or guardian must sign this release if you are under 18 years of age. If you are 18 years old or older, please sign your own name.

I give permission for full participation in the BSA/OA program listed above. IN CASE OF EMERGENCY, I understand every effort will be made to contact me (if participant is an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the licensed health care practitioner selected by the Adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery or injections of medication for my child (or for me, if participant is an adult).

 Signature of Parent/Guardian or Adult

 Date

Send this form & payment to:
 Pennsylvania Dutch Council, BSA
 C/O #6237B OA Family Banquet
 630 Janet Ave., Suite B-114
 Lancaster, PA 17601-4582

**ABSOLUTE
DEADLINE FOR THE
FAMILY BANQUET
REGISTRATION IS
FEB. 2, 2018**

Send registration & payment to:
 Pennsylvania Dutch Council, BSA
 OA 2018 Fellowship
 Code 6237P
 630 Janet Ave., Suite B-114
 Lancaster, PA 17601-4582

Please note any food allergies or physical restrictions below:

**ABSOLUTE
REGISTRATION
DEADLINE FOR
FELLOWSHIP WEEKEND
IS APRIL 14, 2017**

Send registration & payment to:
 Pennsylvania Dutch Council, BSA
 OA 2018 Conclave
 C/O 6237C
 630 Janet Ave., Suite B-114
 Lancaster, PA 17601-4582

Please note any food allergies or physical restrictions below:

**ABSOLUTE DEADLINE
FOR CONCLAVE
REGISTRATION IS
APRIL 18, 2018**