

# 2019 BEAR SUMMER CAMP RESERVATION FORM



Bear Camping Information:  
 Barbara Thatsanithone; E-mail: [Barbara.Thatsanithone@scouting.org](mailto:Barbara.Thatsanithone@scouting.org)  
 10210 Holmes Road, Kansas City, MO 64131-4212 [www.hoac-bsa.org](http://www.hoac-bsa.org)

Pack # \_\_\_\_\_

District \_\_\_\_\_

**\*Primary Contact Name:** \_\_\_\_\_  
\*Correspondence regarding camp will be sent to the PRIMARY contact, INCLUDING INVOICES AND ROSTERS.

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Mobile Phone #: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

**Secondary Contact Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Mobile Phone #: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

It is important to realistically estimate the number of youth and adults on this form. Camps use these numbers for advanced planning of programs, materials and supplies.

# of Scouts \_\_\_\_\_ x \$75.00 = \_\_\_\_\_

# of FT Leaders \_\_\_\_\_ x \$55.00 = \_\_\_\_\_

# of Den Chiefs \_\_\_\_\_ x \$35.00 = \_\_\_\_\_

**Total Fee Due = \$** \_\_\_\_\_

**Session #**  
 (List the Session You Would Like)  
 \_\_\_\_\_

<b>Session Dates</b>					
1	June 9-10, 2019	At Capacity	6	June 28-29, 2019	At Capacity
2	June 14-15, 2019	At Capacity	7	July 12-13, 2019	At Capacity
3	June 16-17, 2019	At Capacity	8	July 14-15, 2019	At Capacity
4	June 21-22, 2019	At Capacity	9	July 19-20, 2019	At Capacity
5	June 23-24, 2019	At Capacity	10	July 21-22, 2019	

**CAMPING**  
**ASSIGNMENT**  
 (For office use only)

Session #:  
 \_\_\_\_\_

Assigned by:  
 \_\_\_\_\_

Non-refundable fees of \$30.00 will apply for cancelled slot. \*See Refund Policy at [www.hoac-bsa.org](http://www.hoac-bsa.org).



## **2019 Refund Policy**

A unit is expected to pay for the number of campers and leaders at the final fee payment date for their camp. **No refunds will be granted after the final fee payment date**, however, transfers within the unit will be allowed. We understand that certain circumstances do arise that may result in a camper not being able to attend camp at the last minute. For a refund after the final fee payment date, a letter requesting a refund and explaining the extenuating circumstances must be sent to the Camping Committee of the Heart of America Council within two weeks of the end of your camping session. Letters should be mailed to:

Heart of America Council  
Boy Scouts of America  
10210 Holmes  
Kansas City, MO 64131  
Attn: Council Camping Committee.

Any request concerning a medical illness of a Scout or Leader must be accompanied by a signed doctor's statement. Refunds will not be considered for change of mind, vacation plans, extended sports schedules, weather or no shows. The Camping Committee will review all requests and their decisions will be final.

I have read and understand the Refund Policy that the Council Camping Committee has stated above. **Refund requests will not be reviewed and/or accept if turned in after the two-week deadline.**

District \_\_\_\_\_ Unit Number \_\_\_\_\_

Signed \_\_\_\_\_