

Langundowi Lodge #46 2018 Ordeals

July 13-15, 2018
August 24-26, 2018
Custaloga Town Scout Reservation



Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Unit Number: _____

Account 900050

Enclosed is my Registration for the July Ordeal

- Early Bird Registration \$10.00 (By July 3)
 Normal registration \$20.00 if mailed after the early bird
Deadline (July 4 to July 12)

Enclosed is my Registration for the August Ordeal

- Early Bird Registration \$10.00 (By August 15)
 Normal registration \$20.00 if mailed after the early bird
Deadline (August 16 to August 23)

WALK IN FEE \$30.00

If a receipt is desired, please enclose a self-addressed, stamped envelope.

Mail this form and payment to:

Langundowi Lodge
c/o French Creek Council, BSA
1815 Robison Rd West
Erie, PA 16509-4999

Check-in is 8:00 p.m. Friday evening (July at Pow-Wow Pavilion; August at Dining Hall). Check-out is 10:00 a.m. Sunday

Bring your own tent camping is available in Moss and Cub Area (July) ad Seton and West campsite (August)

Please complete the other side of this form.

Emergency Information and Waiver

Name of Participant: _____

In case of emergency, contact:

Name: _____

Relationship: _____ Telephone: _____

If the person named above is not available, please contact:

Name: _____

Relationship: _____ Telephone: _____

Name of physician: _____

Address: _____ Telephone: _____

Health Insurance: _____

Policy Number: _____

The Social Security Number of the patient may be requested by the hospital.

Additional information we should know: _____

In case of emergency, I understand every effort will be made to contact me (if an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including, but not limited to, hospitalization, anesthesia, surgery, or injections and medication for my son (or if me, if an adult).

Date: _____ Signature of parent/guardian or adult _____