

Sheriff and Deputy Twilight

Get ready for a roaring, howling and growling good time!

June 27, 2009

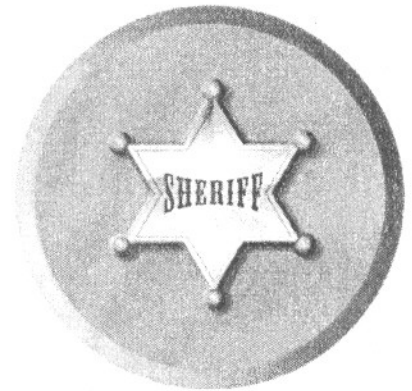
WHAT: What better way is there to kickoff summer than with a family afternoon in the outdoors? Pack your day pack and get ready for a fun-filled afternoon of archery, BB guns, climbing wall, crafts, games and much, much more!! Are you new to Scouting? Then come to Camp Chesebrough and learn with the outing in Scouting is all about!

WHO: All Tiger, Wolf, Bear and Webelos and a parent. Siblings are not included in this event.

WHERE: Camp Chesebrough. Go to http://scccbsa.org/files/2006_resources_chesebrough_directions.pdf for directions. The drive is roughly 20 minutes from downtown Saratoga.

WHEN: The program will start Saturday afternoon at 3 p.m. and conclude after the campfire on Saturday evening, at approximately 8 p.m. Over-night camping is not part of this event.

COST: \$30 per registered Cub Scout and his adult partner—additions Cub Scouts please add \$15 Saturday Dinner and all activity supplies will be provided



The maximum enrollment is 160 families. As always, reservations are made on a first come first served basis. Call to check if there are any cancellations. A waiting list will be developed as needed.

To make your reservation, complete this registration form and return it with your payment to: Santa Clara County Council, BSA; 970 W Julian St, San Jose, CA 95126. Or FAX the form with your Discover, MasterCard or Visa information to (408) 280-5162 Attn: Program Director. You can also check our Web site at <http://www.scccbsa.org> for on-line registration information.

*****If there are any cancellations, please notify the Program Director in writing at least two weeks prior to the committed date. All refunds are subject to a 15% cancellation fee. There are likely to be Scouts on a waiting list. For registration, facility questions, information and confirmation email cubcamp@scccbsa.org. The event will be held rain or shine. No refunds due to weather.

SHERIFF AND DEPUTY TWILIGHT

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ADULT NAME: _____ CUB SCOUT'S NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PRIMARY PHONE: (____) _____ SECONDARY PHONE: (____) _____

PACK #: _____ DISTRICT: _____ SCHOOL: _____

EMAIL: _____

SPECIAL DIETARY NEEDS: _____

CREDIT CARD#: (D/V/MC) _____ EXP DATE: ___/___/___ Amount \$: _____

We found this flyer at: Council Service Center • Recruitment Night • Pack/Den meeting • Roundtable • Scout-O-Rama • School Handout

Event Code – 1 - 6701 - 031