BOY SCOUTS OF AMERICA SEQUOIA COUNCIL

ORDEAL

TAH HEETCH LODGE

MEMBER REGISTRATION FORM

2017 TAH HEETCH **FALL ORDEAL INDUCTION WEEKEND** CAMP CHAWANAKEE

SEPTEMBER 29-OCTOBER 1, 2017

Check in time 5:00pm-7:30pm Friday

Name_____ Date of Birth____/____/____ Home Phone_____

Address_____ Cell Phone_____

City_____ State_____ Zip_____ Unit_____

Chapter_____ E-Mail_____

Indicate your current Status: ☐ Ordeal Member ☐ Brotherhood Member ☐ Vigil Honor Member

What are you paying for at this time:

____ Current Lodge Member *Includes meals for weekend*	$ 15
____ Brotherhood Candidate *If you are eligible (Ten months as an Ordeal Member) Includes meals and a new sash*	$ 45
____ Annual Dues 2018	$ 12
____ Late Fee if paid after September 15, 2017	$ 5

Make Checks Payable to: Sequoia Council Total _____

Minor Consent Form

Sequoia Council, Boy Scouts of America; Authorization and Consent to Treat a Minor
Pursuant to California Civil Code Section 24.8 & Section 12552

Name of Minor_____ Date of Birth_____

The undersigned does authorize Sequoia Council or registered adult leader in charge, as agent for the undersigned to consent to x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment and hospital care for the above minor which is deemed advisable by and be rendered under the general or special supervision of any physician or surgeon, dentist licensed under the Dental Practice Act, weather such diagnosis or treatment is tendered at the office of said physician or dentist, at a hospital, Boy Scout Camp, or elsewhere. This authorization will remain effective while minor is in route to or from, or involved or participating, in any Boy Scout Camp, Boy Scout program or activity, including CAMPING, HIKING & SWIMMING, of Sequoia Council, Boy Scouts of America or unless revoked in writing by the undersigned or delivered to the aforesaid agent.

Date_____ _____ x _____

Parent or Guardian PRINT NAME Parent or Guardian SIGNATURE

Primary Insurance Carrier: _____ Policy Number_____

In the event of an Emergency call: _____ _____

Name Phone

Please use one form per member. **Send form and payment to:**

Sequoia Council 6005 N. Tamera, Fresno, CA 93711 **or** Sequoia Council 230 NW 3rd Ave., Visalia, CA 93291 (559)732-3424

You may also register online @ seqbsa.org

If you have any questions please contact the Lodge Chief @ pkferggie@gmail.com and/or the Lodge Adviser @ jfboylan195@gmail.com