



2020 CAMP HIAWATHA CAMPSITE RESERVATION FORM

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Council: _____ District: _____

E-mail: _____ (required)

Troop Number: _____ Female Troop: _____ Male Troop: _____ Date Submitting: _____

We expect to have _____ # of Scouts and _____ # of Adults/Leaders.

Please indicate the weeks your Unit requests to attend camp, by listing a 1, 2, and 3 in front of the week(s), in order of preference.

___ Week 1: July 5 – July 11 ___ Week 2: July 12 – July 18

Please indicate three choices below by putting; 1, 2, & 3 in front of the site your Unit requests in order of preference.

| Choice # | Campsite | Choice # | Campsite |
|----------|---------------|----------|--------------|
| _____ | 1 Amikwa | _____ | 5 Noquet |
| _____ | 2 Kickapoo | _____ | 6 Potawatomi |
| _____ | 3 Menominee | _____ | 7 Ottawa |
| _____ | 4 Meshwakihug | _____ | 8 Sauk |

Note: If your Troop has less than 60% of the site capacity, the Council reserves the right to assign another Troop to use the patrol areas in that Troop site not used by your Troop.

Does your Unit prefer a single gender campsite or does the Unit have no preference? ___ Single Gender ___ No Gender Preference

Is your Unit willing to host a Scout from a different Unit? Yes ___ No ___ We plan to share a campsite with Troop # _____

Attached is our \$100.00 site reservation fee. We understand that this will be applied to the total of our camp fees and is non-refundable.

Upon approval of this form, the registration process for participants will be completed online.

For Bay-Lakes Council Units Only:

If wanting to apply deposit from Unit Account on file at Bay-Lakes Council Office, please check the box indicating below.

I give Bay-Lakes Council permission to remove the \$100.00 deposit from our Unit Account.

**Mail form and deposit to:
Bay-Lakes Council
P.O. Box 267
Appleton, WI 54912-0267**



OFFICE USE ONLY:

Date Rcvd: _____

Acct #: 1-2630-711-21