



# CURTIS S. READ TREKS 2019 RESERVATION FORM

Group Name _____ <small>Type/Unit # / Community for Scout Groups</small>	Today's Date: _____
Council Affiliation _____ <small>For Scout Groups</small>	Date/s of Trip: _____

**Group Leader / Contact**

Name: _____	Phone: _____
Address: _____	Cell: _____
City/State/Zip: _____	Email: _____

**Leader During Activity (if different)**

Name: _____	Phone: _____
Address: _____	Cell: _____
City/State/Zip: _____	Email: _____
*Driver License: _____	*Date of Birth: _____

\*The above is required by the NYS Dept. of Environmental Conservation to obtain permits

<b>Participating Group Size:</b> _____ Youth (under 18), includes ____ male, ____ female _____ Adults (18 and over), includes ____ male, ____ female	<b>**Total crew size can be no more than 7 for all wilderness treks** A group size of 5 youth/adult and 1 adult is included in the group rate.</b>
--	--

Please indicate any special needs your group may have. (Irregular schedule, extra transportation needs, members with disabilities and/or special diets, etc.)

---

---

---

---

## Summer Programs

### Adirondack Treks

- Backpacking    High Peaks    Rock Climbing    Canoeing    Kayaking

Indicate Itinerary Requests (if any): \_\_\_\_\_

### 2019 Dates:

- July 7-13    July 14-20    July 21-27    July 28-Aug 3    Aug 4-Aug 10    Aug 11-17

A \$300.00 non-refundable deposit (applied to your total fee) is required with this application or your reservation is subject to cancellation.

An additional payment of \$1,250.00 is due April 1<sup>st</sup>. Your final balance will be due by May 15<sup>th</sup>.

All Medical forms and Dietary needs forms must be submitted no less than 6 weeks prior to your trip.

**I have read and understood all information regarding payments and forms on this application:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_ Email: \_\_\_\_\_



Please contact us to verify program availability before submitting your registration form.

You can reach us at (914)-449-2612, or by email at [wpc.camping@scouting.org](mailto:wpc.camping@scouting.org)

Please visit our website at [www.wpcbsa.org/read/summitbase](http://www.wpcbsa.org/read/summitbase)

Return this form with deposit(s) to:   Camping Department  
Westchester-Putnam Council, BSA  
41 Saw Mill River Rd.  
Hawthorne, NY 10532