



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

| | |
|---|--|
| Participating Group Size: _____ Youth (under 18), includes ____ male, ____ female _____ Adult (over 18), includes ____ male, ____ female | **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. |
|---|--|

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 Choices (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 1st. Your final balance will be due by May 15th.

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
Please visit our website at 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