

Scout Information & Program Choices

Camp Cedars

Please complete this form and return it to the Scoutmaster.
A leader from the Troop will enter this information in the online system or
you can enter it via Parent Portal.

Name: _____ Age (start of camp): _____ Rank: _____

T-shirt size: _____

Dietary Needs: _____

Program Preferences:

Period 1: _____

Period 2: _____

Period 3: _____

Period 4: _____

Period 5: _____

6th preference: _____

7th preference: _____

Refer to these program resources:

[Program Schedule](#) (list by class period)

[Programs listed A-Z](#)

[Program Guide](#) (class descriptions)

[Program locations](#)

Do you want to attend a specific program with a friend? Please list class and friend's name. _____

Other Program times:

Lunch: _____

Activity Period: _____

Evening Programs: _____