



Webelos Camp-Ins



January 15-16 and January 29-30 2010

Come join the Catawba Science Center and the Piedmont Council Boy Scouts of America for a night to remember! Classes are a great chance to work towards your activity badges, so sign up early to take advantage of this opportunity to visit CSC!

Webelos' Camp-in Activities:



- Physicist** Participate in demonstrations that may seem like magic while experimenting with the laws of motion. Build a balloon rocket.
- Scientist** Learn the scientific method as you carry out experiments using Madagascar Hissing Roaches.
- Aviator** Experiment with air pressure and find out how airplanes generate lift and are able to fly.
- Naturalist** Study grasshoppers inside and out. Examine a grasshopper, record your observations and then dissect it.

Morning Activities include exploring the exhibits and science shop, plus a digital show in our planetarium theater! Activities will conclude at 9:30 am.

ALL REGISTRATION FORMS MUST BE SIGNED BY SCOUT LEADER

Please send in registration forms together as a pack

Cost: CSC members \$35 per scout; nonmembers \$40 (2 adult leaders per group free). Additional adults are \$10. Payments MUST accompany registration. Registration received after deadline is an additional \$5.

Registration as a pack is strongly encouraged.

What to bring: Sleeping bag, sleeping pad, pillow, toothbrush, toothpaste, and spending money for the Gift Shop. Wear comfortable clothes in which you can sleep.

Where to come: Catawba Science Center (North Lobby – off 3rd Street NE – near library entrance), in the Arts & Science Center of Catawba Valley, on the SALT Block, 3rd St. & 3rd Ave. NE in Hickory.

When: Check-in begins at 5:45 pm in the Ground Level Lobby (Library side); orientation begins at 6:15 pm.

Refund Policy: Refund available 2 weeks prior to camp-in, minus a \$10 administrative fee.
No refund available after this date.

Registration DEADLINES:

January 8th for the January 15th Camp-In

January 22nd for the January 29th Camp-In

Send registration and payment to:

Catawba Science Center, P.O. Box 2431, Hickory, NC 28603

Note: Piedmont Council is not accepting registrations or payments for camp-ins.

For more information, please contact Catawba Science Center at 828-322-8169 or visit www.CatawbaScience.org

Catawba Science Center Webelos Camp-In Registration Form

Registration as a pack is strongly encouraged.

Registrations are taken on a first come-first served basis when payment is made.

Space is limited to 100. Please make additional copies as necessary and **send forms together.**

Please check date of camp-in you wish to attend (**make sure your pack registers for the same date**).

January 15-16, 2010

January 29-30, 2010

Scout Name _____ Pack # _____ Den # _____ Home Phone _____

Parent Name(s) _____ Work/Cell Phone _____ Email _____

CSC Member ___ Yes ___ No If Corporate Member, name of Employer _____

Mailing Address _____ City _____ State _____ Zip _____

Primary Scout Leader attending (*not optional*) _____ Phone # _____

(At least one adult leader or parent (per 6 scouts) **MUST** accompany pack at all times)

Secondary Scout Leader attending (*optional*) _____ Phone # _____

I, _____ certify that this scout is a registered member of Cub Scouts of America.
Scout Leader's Name/Position

Signature

Parent or guardian attending in addition to Scout Leader (\$10) _____ Phone _____

Emergency Contact (If parents cannot be reached)

Name _____ Phone # _____

Health/Accident Insurance Company Name _____

Name of Insured _____ Policy Number _____

Medical Release

If currently on any medications, please list & describe schedule for emergency administration. Include any asthma or allergy medications. If any medications must be administered by CSC staff, written directions must be sent.

Allergies _____

Medications _____

I, _____, do hereby authorize the Catawba Science Center staff to act on my behalf in seeking any medical treatment or medicine for my son or myself during the camp-in.

Signature

Date

TOTAL AMOUNT DUE _____

_____ Check enclosed (payable to CSC) Charge my ___ Visa ___ MasterCard ___ American Express ___ Discover

Name on card _____ Card # _____

Expiration Date _____ Signature _____