

PHILMONT 2012 PARTICIPANT APPLICATION

2012 Philmont participants must be 14 years of age OR
Completed 8th Grade and be at least 13 years of age prior to participation.

COST: \$1275.00 in council \$1350.00 out of council

Trip Dates: June 16th-July 1st 2012

Fee payment schedule:

\$100.00 Deposit by March 1st 2011 (**\$175.00 out council**)
\$250.00 Due June 1st, 2011
\$250.00 Due Aug. 1st 2011
\$350.00 Due Jan. 15th 2012
\$325.00 Due April 15th 2012

MAIL ALL PAYMENTS TO:

Attn: Philmont Contingent 2012
Heart of Ohio Council, BSA
P.O. Box 368
Ashland, Oh. 44805

There will be a MANDATORY meeting March 17th 2012 9:30-12:30 at Firelands Scout Reservation in the AVERY HAND DINNING HALL.

Your Deposit Received between Dec. 15th 2010 and March 1st 2011 will hold your spot unless the contingent is full. All reservations are filled in the order received. **Out of council may apply April 1ST.** Your canceled check is your receipt. Failure to remain current with your payments will be cause for cancellation unless prior arrangements have been made with the contingent coordinator. **All payments are completely non-refundable.**

Package includes: Transportation via AMTRAK from Sandusky Ohio, Philmont Fee, Contingent travel bag, Contingent jacket, Training Shake down meals for 1 weekend of your choice. **MEALS on AMTRAK are at your own expense.** Amtrak does provide a Dinning car and snack car. Crews may pack food on the train. We will stop at a grocery store on the return trip (at your expense). **The fee may be slightly higher or lower based on the final AMTRAK quote which is posted on August 1st 2011.**

Updates and forms will be posted to www.trekphilmont.org as needed

For More information contact:
TERRY BROWN CONTINGENT COORDINATOR
(440) 967-2917 voice- (440) 986-2218 fax
Email: tbrown@eriecoast.com

Please complete the form below and mail along with your deposit to reserve your spot (one per participant) BY MARCH 1st, 2011
Troops requesting a crew must submit a roster and be willing to accept individual addins if you have less than 12.

COPY FORM AS NEEDED

Name _____ DOB ___/___/___

Address _____ Sex: M ___ F ___

City _____ State _____ Zip _____ Troop _____

District _____ Council _____

Daytime Phone _____ Evening Phone _____

Email Address: _____

Desired co-crew members submitted together with roster if full crew requested