

FAMILY CAMP CARD RECEIPT

(Scout Parent to turn in to Unit Camp Card Leader)

PACK TROOP CREW SHIP LAB POST

DATE _____ DISTRICT _____

UNIT# _____

NAME _____

ADDRESS _____

PHONE _____

E-MAIL _____

Camp Cards Issued	To be completed upon card turn in
Total number of Cards issued on this receipt _____	Credit Cards \$ _____ Checks \$ _____ Cash \$ _____ TOTAL \$ _____
	_____ Cards Sold _____ Cards Returned _____ Total Cards this receipt

I recognize that each card has a cash value of \$10. ***There is no risk to you if unsold cards are returned to the unit by _____.*** By signing below, I recognize that I will be charged \$10.00 for every unreturned card.

I will return all unsold cards and money collected to my unit by _____.

I agree to these terms:

Parent Signature _____ Date: _____

Name of Youth (if applicable): _____

Please ask your unit camp card chair for details on how these funds will be used within your Pack, Troop, Crew, Ship, Lab, or Post