

SHORT TERM CAMP PERMIT
WILLIAM C. CANNON SCOUT RESERVATION
CENTRAL N.C. COUNCIL, BSA

PLEASE RETURN FORM TO:
Central N.C. Council, BSA
Attn: Camp Ranger
Gregory.Etheridge@scouting.org

Phone: (704) 982-0141 ext. 329
Fax: (704) 982-0262

Unit Type and Number _____ # Attendees: youth: _____ adult: _____
Date(s) of Activity: _____ Arrival Time: _____ Departure Time: _____

All units and visitors must check in and out with the Camp Ranger

**LEADERS IN CHARGE – ALL UNITS MUST HAVE 2 DEEP LEADERSHIP
(Required – At least one 21 yrs. or older and one 18 yrs. or older)**

Position	Name	Email	Phone

TRANSPORTATION: () Private car (s) () Bus () Hiking () Other

It is the unit leaders and/or committees' responsibility to ensure that all drivers, vehicles, and insurance coverage will meet the national requirements as listed on the local permit. Leaders driving must be at least 21 years of age. No vehicles are allowed in camping area to comply with local fire codes and National BSA policy. All vehicles should be parked in designated parking lots.
MEDICAL – Each unit is responsible for securing a health release statement from the parents or guardian of each Scout. Hospitals will not perform medical care without parental consent. Camp emergency telephone is 704-422-3025

Notes or Special Needs:

Please reserve the following facilities for our use. (Check appropriate boxes.)	Check here	Time	Cost - will be determined after form is submitted and will be remitted to you by the camp ranger after approval
Waterfront – (Requires Safe Swim Defense) (Canoes ___ Row Boats ___ Kayacks ___ Paddleboards ___)			\$ -
Moss Picnic Table			\$ -
Staff Lodge			\$ -
Montgomery Lodge			\$ -
Pavilion			\$ -
Dining Hall Table Are			\$ -
Campsite - select campsite below 1A, 1B, 2A, 2B, 3A, 3B, 4A, 4B, 5A, 5B, 6A, 6B, 7A, 7B, 8A, 8B, 9A, 9B, 10			\$ -
Usage of the following facilities has fees associated with their use. They also require an adult member of your unit has the proper certifications to open the facility. All certifications must be submitted with this request for approval.			
Rifle Ranges (Must provide own guns & NRA certified instructors/certificates) (plus ammo)			\$ -
Shotgun Range (Must provide own guns & NRA certified instructors/certificates) (plus ammo)			\$ -
Archery Range (Must provide own bows & at least 1 USA Archery L1 instructor/certificates)			\$ -
Bathhouse (Ranges ____, Campsite __)			\$ -
Grand Total of Fees			\$ -

Does your unit sell camp cards? _____
Yes _____ No

Does your unit sell pocorn?
_____ Yes _____ No

Did your unit attend Camp Barnhardt for summer camp for a day camp last year?
_____ Yes _____ No

Does your unit host a family Friends of Scouting presentation?
_____ Yes _____ No

The following facilities are not available for Unit use: Dining Hall kitchen and swimming pool.

Troop check-in time is not before 3:00pm on day of arrival. Check out must be before 10:30am on day of departure unless approved prior by Camp Ranger.

All visitors to the camp **MUST** check in with the Camp Ranger before entering camp.

All Council and National, BSA policies must be followed. No alcoholic beverages allowed on property No outside firewood allowed. No Pets allowed.

Council Program Director Approval: _____ Date: _____

Rangers approval _____ Date: _____

Date to Received _____

Date Added To Calendar _____