



# Cub Scout Resident Camp 2024 Unit Roster & Registration Form

Unit Leader Information

Cub Pack: \_\_\_\_\_ Town: \_\_\_\_\_

Name	Phone	Email

**Cubs Attending**

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<b>For Office Use ONLY:</b>	
Date Received:	_____
Number Cubs:	_____
Registration Fee/Cub:	\$ _____
Campership Credit:	\$ _____
Total Cub Registration:	\$ _____
Number Paid Adults:	_____
Registration Fee/Adult:	\$ _____
Total Adult Registration:	\$ _____
Number Free Adults:	_____
Total \$ Received:	\$ _____
Balance Due:	\$ _____
<b>Notes:</b>	

Submit Forms & Payment to:  
Black Warrior Council, BSA  
PO Drawer 3088  
Tuscaloosa, AL 35403

Online, go to:  
[www.bwc-bsa.org/cubresidentcamp2024](http://www.bwc-bsa.org/cubresidentcamp2024)