

# Yawgoog Scout Reservation Pre-Check-In Instructions

Please use this form if your Troop will be taking advantage of Yawgoog's early check-in.

All packets must be complete according to the check list below or they will not be processed.

Troop Check-in Form: To be received at camp 16 days prior to your arrival.

\_\_\_\_\_ Medical forms for all Scout and Adult campers must be **COMPLETELY** filled out with no blanks. All signatures must be present. They must be in the same order that they appear on the roster.

\_\_\_\_\_ **Three** copies of your ROSTER **complete** with addresses and phone numbers. These must be typed or printed out from a computer. **No hand-written** rosters will be accepted. You must include the appropriate columns as the Yawgoog Roster.

\_\_\_\_\_ A LIMITATIONS AND RESTRICTIONS form. Anyone with a restriction or limitations must be listed. If there are none, the form still must be sent in.

\_\_\_\_\_ A MEDICATION CHECK-IN form. Anyone taking medications while at camp must be listed. Narcotics and Refrigerated medicines can be taken to the Health Lodge upon arrival to camp. If no one is taking meds, a form still needs to be sent in.

\_\_\_\_\_ Your fees must be **completely paid** and correct 16 days prior to your arrival to camp. Each unit will be called to verify correct payment.

We will call or email you after we receive the packet to confirm that it is complete. You will only have to send a representative from the Troop to the Bucklin on Sunday between 3:30 and 6 PM to check medications, confirm your attendance numbers, receive your check-in receipt, pick up your HATS and your Adult Wrist Bands. Remember, your site will be set up according to your Troop payment worksheet. You must call CAMP at: 401-539-2311 during business hours if you have any last minute changes. If there are, we can fix them before you arrive.

Troop number: \_\_\_\_\_ Community: \_\_\_\_\_ Camp: TP MB SB Week \_\_\_\_\_

Person Submitting Packet: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Troop Position: \_\_\_\_\_

Email Address legibly please: ☺ \_\_\_\_\_

Alt Email Address : ☺ \_\_\_\_\_

Please send this checklist with your packet. If you have any questions, please call us.