



PHILMONT SCOUT RANCH 2019 ADULT APPLICATION

Dan Beard Council

Boy Scouts of America

(Please print all required information clearly)

Name of Adult: _____ Date of Birth: _____

Street Address: _____ Unit/Crew #: _____ District: _____

City/Town: _____ State: _____ Zip Code: _____

Home Email Address: _____ Home Telephone: _____

Work Email Address: _____ Business Telephone: _____

Leadership Position in Unit: _____

Leadership training completed: _____

Prior treks (days & miles): _____ Gender: _____ Male _____ Female

Spouse/Other Name: _____ Work Telephone: _____

Home Telephone: _____ Cell Telephone: _____

I understand that participation in a Philmont Scout Ranch experience is a commitment of time and effort, which I must give top priority. I accept responsibility for taking advantage of training to be offered and I will make every effort to attend all training hikes and camps. I understand that my participation is subject to the approval of the Council High Adventure Committee and Council Staff, based on considerations of my physical condition, my experience, and my active participation in building a safe and productive crew dynamic. Finally, I accept the financial commitment and payment schedule, which is required to participate in this experience.

Adult's Signature

Date

Scoutmaster/Coach/Advisor's Signature (If Applicable)

Date

MAIL COMPLETED APPLICATION TO:

Dan Beard Council | Program Department | 10078 Reading Rd., Cincinnati, OH 45241

Or email to camping@danbeard.org