UNIT PERMIT TO USE CAMP HO NON WAH Must be submitted at least two weeks in advance. Copy needed at check-in Council: _____ Unit type & no.: _____ District: _____ Phone: _____ Leader in charge: Arrival date: _____ Approximate time: Departure date: Approximate time: CUB CAMPING: BALOO trained leader in attendance: Camping Fee: \$5.00 per person for up to 2 nights. Includes day visitors. *Fee may be waived by performing a Ranger-approved service project with a minimum of two (2) hours per person.* Number expected: Adults_____ Youth_____ Creek Crockett Bohicket____ Boone ____ Carson _____ New Shirmer ____ Tribe _____ Unali'yi _____ Matigwa _____ Facilities Requested \$5.00 per day Council Ring Handicraft Training Shelter Tribe Shelter Chapel ____ \$200.00 per day plus deposit Kitchen ____ Dining Hall Miscellaneous charges per day Dining Hall projector (\$15.00) Staff Center (\$30.00) Wi-Fi (\$10.00) THE FOLLOWING FACILITIES REQUIRE THE PERSON IN CHARGE TO BE CERTIFIED IN THE ACTIVITY WITH COPY OF CERTIFICATE ON SITE AND SUBMITTED WITH THIS USE REQUEST. I understand that swim tests MUST be administered before arrival at camp if using aquatic equipment. Person in charge of boating activity must have a copy of their Safe Swim Defense, Safety Afloat, and CPR certifications. For range activities, person in charge must hold Range Officer Certification. Print Name Signature Date Aquatic Equipment (must be used onsite) \$2.00/day/canoe (14 available): _____ \$5.00/day/sailboats (Sunfish only): _____ \$2.00/day/kayak (15 available): _____ Bohicket Dock (no fishing): _____ no charge Range Equipment (No ammunition or targets provided) NO OUTSIDE FIREARMS PERMITTED Rifle Range (\$10.00 per day): _____ Shotgun Range: (\$30.00 per day): _____ \$5.00/day/rifle (22 caliber): _____ \$2.00/day/BB guns: _____ \$10.00/day/shotgun (12 & 20 gauge): _____ Archery Range (\$20.00 per day – includes bows, arrows, targets): ___ I have read and understand the "Coastal Carolina Camp Manual" and agree to follow the rules and guidelines. I also understand that if any damage occurs to camp property and is determined to have been caused by my unit, the unit will be responsible for repairs. In order to receive a refund, a 5 day cancellation is required.

Print Name		Signature		Date
	For Office Use Only \$25.00 Deposit	Invoice #:	Approved by:	Date:
	required			