Camp Coker Usage Form

Request should be made at least **two weeks in advance**. With the completion of this form, the unit/district agrees to abide by the practice of *Leave No Trace* camping and by the instructions of the Camp Ranger. Facilities used must be cleaned and inspected prior to departure. If you must cancel your camping reservations, you agree to contact the Council Service Center ***at least*** twenty-four hours prior to scheduled arrival. **Your unit agrees that the actual use of facilities/sites will be assigned by the Council Service Center**. A roster of all youth and adult participants must be given to the Ranger at check-in time.

Leader Information

Type/Unit# _____ District _____

Leader Name _____

Address _____

City-State-Zip _____

Home Phone (___) _____

Work Phone (___) _____

E-mail _____

Fax _____

Activity / Event Information

☐ Unit Activity ☐ District Activity

☐ Council Activity ☐ Other

Event Name _____

Participation: **# Youth Expected** _____

 # Adults Expected _____

Date/Time of Arrival _____

Date/Time of Departure _____

2nd Leader Name _____

Note: Check ( ) the items or facilities that you require for your activity. Please be specific. Items marked with an (*) may require special training or approval.

CAMP	☐ Campsite(s) _____			☐ Handicraft
	☐ Council Ring	☐ Ecology Hut	☐ Flag Pole Area	☐ * Waterfront
	☐ Dining Hall	☐ * Kitchen	☐ * Shooting Ranges	☐ Bath House (W)
	☐ Bath House (E)	☐ Activity Field	☐ Birdhouses	☐ Chapel
*** COPE/ CLIMBING**	☐ Dormitory #1	☐ Dormitory #2	☐ Low Course	
	☐ Medium Course	☐ High Course	☐ Climbing Tower	
	☐ COPE Training Center		☐ Other Items: _____	
*** AQUATICS**	☐ ____ Canoes	☐ ____ Kayaks	☐ ____ Rowboats	☐ ___Sailboats
	(**put # required in blanks above**)			
	☐ Non-swimmers	☐ Beginners	☐ Swimmers	☐ Fishing Pier

Council Use	Received	Approved	Response Faxed	* Certification