

PEAK WEEK REGISTRATION:

If planning to participate in Peak Week, please complete the following information and fax to Shirley Neiderhiser at (540) 265-0656 or shirleyn@bsa-brmc.org. A Peak Week representative will contact you after your form is received. If you have any questions, feel free to contact Chris Dempsey, Peak Week Director, at (540) 558-8834 or ctdempsey@bsa-brmc.org.

Church / Organization Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Head Minister's Name: _____ Phone: (____) _____

Lead Adult Contact for this event: _____

Title/Affiliation with Group: _____

Mailing Address for Lead Contact: _____

City: _____ State: _____ Zip: _____

Day Phone: (____) _____ Evening Phone (____) _____

Cell Phone: (____) _____ Email: _____

July 27 through August 2 – Peak Camp Reservations

_____ # of YOUTH

_____ # of ADULTS

Groups should plan to bring 2 adult leaders minimum. One must be at least 21 years of age; the second may be as young as 18 if group is not co-ed. All co-ed groups must have at least one 21+ adult of each sex to chaperone your youth members.

RESERVATION POLICIES AND CHURCH UNDERSTANDING

DEPOSIT:

A \$100 deposit is required to secure your place at Peak Week. The deposit is fully refundable until June 15th. It is non-refundable if your group cancels after this date. Otherwise this fee is applied in full to the balances for your participants

FULL PAYMENT:

Full payment of \$200 (Crews) or \$280 (Youth Groups) for each youth and adult participant must be submitted by July 1st 2008 to the Blue Ridge Mountains Council. Late payment will jeopardize a group's slots to other groups waiting for available spaces

REFUND POLICY:

Refunds of all but \$100 will gladly be given to those dealing with documented emergency situations. Such situations include deaths of immediate family members, military transfers, or serious illness. To ensure a quality event, emergencies cannot be defined as changing vacation schedule, or a last minute change of plans.

I understand and accept the fee schedule and fee policies stated and want to make a reservation to attend Peak Week with the Blue Ridge Mountains Council BSA

Church Minister/Youth Leader: _____ Date: _____

Signature Requested

Please return this completed form to confirm your reservation. Fax or Email to the following Address and put to the attention of Shirley Neiderhiser

Blue Ridge Mountains Council Boy Scouts of America
2131 Valley View Blvd., NW / P.O. Box 7606 / Roanoke, VA 24019
Telephone: 540-265-0656 / Fax 540-265-0659
shirleyn@bsa-brmc.org or ctdempsey@verizon.net