PHILMONT TRAINING CENTER
2008 REGISTRATION FORM

Philmont Training Center ⚜ 17 Deer Run Road ⚜ Cimarron, NM 87714 ⚜ 505-376-2281
E-mail: trainingcenter@philmontscoutranch.org

NOTE: *Please read the instructions printed on the back of this form before completing. Keep a copy of this form.*

FAX FORMS WILL NOT BE ACCEPTED

PERSONAL INFORMATION

WRITE LEGIBLE

Name: _____ Current/Primary Scouting Position: _____

Address: _____ M or F (circle one, for housing purposes only)

Additional Address: _____ Home Phone: (____) _____ -_____ (*no extensions, please*)

City, State, ZIP: _____ Other Phone: (____) _____ -_____ (*no extensions, please*)

Nametag Name: _____ E-mail Address: _____

Council #:_____ Council Name: _____

CONFERENCE PARTICIPANT REGISTRATION INFORMATION

Conference Title (see 2008 Conference Schedule)	Dates (see 2008 Conference Schedule)	Fees

$420 Conference Fees due with registration form. **Late fee of $50** applied after June 1 (Total conference fee after June 1 is $**470**).

FAMILY REGISTRATION INFORMATION

Members of **immediate** family and Mountain Trek guests. *If your spouse is participating in a conference, please request a separate application and attach it to this sheet.*

Spouse and Children (Name to appear on Name Tag — first and last names)		**Program**	**M/F**	**Age**	**Fee**
► Spouse:					
► Child:					
► Child:					
► Child:					
► Child:					
► Child:					
				Total	

PAYMENT SCHEDULE
- Pay all fees (conference and family) at one time *or*
- Pay conference fees with application then family fees by May 1
- *Use either credit card or check*

CANCELLATION/REFUND POLICY
We charge a non-refundable administrative **Cancellation Fee of $75.** *Refunds must be requested in writing;* FALL CONFERENC FEE deadline **is July 1**; a late fee of $50 will be added after July 1.

COUNCIL APPROVAL
(Not necessary if pre-printed ID Number appears Below)

ID CODE NUMBER:

Scout Executive Signature:_____

Photo (Talent) Release: I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made during my visit to Philmont Scout Ranch by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the Boy Scouts of America and I specifically waive any right to any compensation I may have for any of the foregoing.

►**Please sign to accept the conditions stated on the form**:_____

FOR PHILMONT USE ONLY

(circle one)
Credit Card Type: Visa / MasterCard / Discover CVC CODE: (on back of card) | | |

Credit Card Number: | | | | | | | | | | | | | | | | |

Cardholder's Name:_____ Cardholder's Signature:_____

Expiration Date___/___ Billing Address:_____