

DATE RECEIVED _____

CONFIRMED _____

**F. D. Roosevelt State Park
Scout Merit Badge Program Application**

Complete entire form and keep a copy for your records!

Leader's Name _____ Day Phone _____

Cell Phone _____ E-mail _____

Organization _____ Best Time To Call _____

Address _____ Evening Phone _____

City _____ State _____ Zip _____ Fax # _____

Troop # _____ Earliest Arrival _____ **AM** (ET) Departure _____ **PM** (ET)

Quantity of Participants: _____ Adults _____ Scouts

Bringing Picnic Lunch & Drinks? Yes or No Some picnic areas are sheltered

Basic Merit Badge Program cost is \$60 for 5 scouts. Each additional scout is \$10 per person.
Some programs require additional fees if there is a material cost involved.

Transportation: Check all that apply. Cars/ Vans **How Many?** _____ (Please carpool!)
 School Bus Charter **How many?** _____ All vehicles must arrive together.

List **at least 4 Program DATES** in order of preference:

Preferred Time of Program: _____ Length of program: _____

List your **Scout Program** request:

Other information to help us accommodate your group (allergies, limited mobility, etc.):

Thank You!
