

STAFF REGISTRATION FORM

"The Trail of Friendship"

SPRING WOODS HIGH SCHOOL

PLEASE PRINT ALL INFORMATION: (duplicate form as needed; one form per person)

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ Email: _____

Unit #: _____ Scouting Position: _____

District: _____ Council: _____

Staff Position _____ **Periods that I am teaching** (if applicable): 1 2 3 4 5 6

Class I am teaching (if applicable): Session Number. _____ Title: _____

NOTE: It may be possible for you to take a class or two if you have time after fulfilling your staff obligations. If so, please stop by the Registration booth and select a class from the available sessions in the period(s) you have free or list a couple of choices below and we'll try to save you a seat.

Period	Session Number	Session Name
_____	_____	_____
_____	_____	_____
_____	_____	_____

ALTERNATE – Select 1 – one-hour session (in case one of your choices is full)

Staff Development:

Cockrell Scout Center
Cockrell Scout Center

All trainers, please indicate which one session you plan to attend:

_____ **Session 1** – Wednesday, September 23, 7:00 – 9:00 pm
_____ **Session 2** – Monday, October 19, 7:00 – 9:00 pm

All-Staff Meeting:

Trainers and Program
Staff should attend

Monday, October 26, 2009

6:30 pm gathering, 7:00 pm meeting
Cockrell Scout Center, Loop 610 & East TC Jester

Akela's Trail Set-up:

Friday, November 6, 2009, 5-9 pm Spring Woods High School

Staff Registration

(Resource CD and Patch included)

_____ \$ 15.00

Youth Conference Staff

Each Scout must complete a separate application.

_____ \$ 15.00 – includes lunch

Lunch - supports Spring Woods High School

_____ \$ 8.00

Extra Resource CD

_____ \$ 5.00

Akela's Trail T-Shirts: "The Trail of Friendship" - **MUST PREORDER SHIRTS BY OCTOBER 15. NO ON-SITE SALES.**

_____ \$ 11 **M** _____ \$ 14 **3XL**

_____ \$ 11 **L** _____ \$ 15 **4XL**

_____ \$ 12 **XL** _____ \$ 16 **5XL**

_____ \$ 13 **2XL**

Amount Enclosed:

Registration + Lunch + Extras

\$ _____

Make checks payable to

Mail Staff Registration form by Monday, OCTOBER 26, 2009 to:

Sam Houston Area Council
Akela's Trail
P. O. Box 924528
Houston, TX 77292-4528

Account No. 1-6801-957-20