

EVENT REGISTRATION FORM

For events which Council is supporting administratively
(i.e. collecting registration & fees)

For Office Use Only

Date: _____
 Receipt #: _____
 Amount Paid: _____

Council Office Contact Information
 Ph (local Ottawa) - (613) 225-2770
 Ph (Long Dist.) - 1 (888) 726-8876
 Fax: (613) 225-2802
 E-mail: events-ottawa@scouts.ca

Organizers Complete This Section AND the Attendee categories and Fee Structure below

SELECT
COUNCIL



Is this a Council-level Event? YES (see above) NO (complete next line)

Is this an Area-level Event? If Yes, please specify Area → _____

Event Name: _____ Acct Code:

Event Date: _____ Other (if required): _____

Event Contact: _____ Event Contact E-mail or Phone: _____

Important Notice to Registrants:

REGISTRATION DEADLINE:

Registrants Complete This Section (excluding the shade boxed Areas)

The Event Information Package will contain all details. Questions? Please direct to the Organizers, not the Council office.

Affiliation: Scouts Canada Girl Guides of Canada Other (e.g. BSA)

Group Name: _____ Program Section: _____

Contact Name: _____ Phone #: _____

Contact E-mail: _____ Today's Date: _____

Event Fees Calculation:

Attendee Categories Below

	#		EARLY FEE	or	FULL FEE		Subtotals
<input type="checkbox"/>		X	\$	or	\$	=	\$
<input type="checkbox"/>		X	\$	or	\$	=	\$
<input type="checkbox"/>		X	\$	or	\$	=	\$
<input type="checkbox"/>		X	\$	or	\$	=	\$

Submit Payment for this Amount → \$ _____

Make Cheque Payable to →

Send Registration and Payment to: **1345 Baseline Rd., Suite 200, Ottawa, ON, K2C 0A7**
Council Office will confirm receipt of registration & payment with the contact identified above.

*Faxed or e-mailed forms only indicate intent, but do not constitute a confirmed registration until payment is received (see contact info above).
 Under extreme exceptions, alternate payment arrangements (i.e. credit card) may be permitted.
 Scouts Canada Groups are required to pay with Group cheques.*

EVENT ATTENDANCE LIST

Registrant Group to Complete The Following Section

Please list the names of all Participants, Volunteers and Parents/Guardians that will attend this event. All Scouts Canada attendees MUST be fully Registered and "Active" members. Other affiliation members are responsible for meeting their Organization's requirements.

Group Name: _____

VOLUNTEERS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

PARENTS/GUARDIANS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
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8. _____
9. _____
10. _____

PARTICIPANTS

1. _____
2. _____
3. _____
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43. _____
44. _____

Mail to: 1345 Baseline Rd., Suite 200, Ottawa, ON, K2C 0A7 or by e-mail: events-ottawa@scouts.ca

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