<u>Cub Scout</u> High Adventure Award Application

California Inland Empire Council
Boy Scouts of America
1230 Indiana Ct.
Redlands, CA 92374
1-877-732-1450 ext 111

Date ____/____/_______

Tour Permit #

____
(Attach copy)

Pack Number _________

Council/District _______________

Name of Award ____________________

Sponsoring Council ___________________

☐ Cash ☐ Unit Account

______ Awards at $________ Each for __________ boys and _________ adults

Amount $________ tax $___________ shipping $___________

Total $_____________ Dates: ____/____/_______ to ____/____/_______

Location of Adventure (brief description of starting-point, activities and ending-point)

____

____

____
(Include description of any trail work or conservation project.)

I the undersigned in charge, do certify that I have read and understood the complete requirements for the award listed above, and do further certify that all of the participants, whose names are listed below, <u>have fully met the requirements for this award</u>.

Name of Adult in Charge ____________________________ Position _________________________

Signature ____ Pack # __________________

Address ____

City ___________________________ State ______ Zip ________ Phone # (____) _____ - _______

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Use the following space for **names of boys and adults** and comments.

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