

# 2008 UNIVERSITY OF SCOUTING REGISTRATION

**October 18, 2008**

(Please copy as necessary, **one** registration per form)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, & Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_

(Circle One: Pack / Troop / Team / Post / Crew / District)

District :

Unit #:

Email: \_\_\_\_\_

	PERIOD 1 8:30am	PERIOD 2 9:30am	PERIOD 3 10:30am	LUNCH 11:20AM - 12:35PM	PERIOD 4 12:45pm	PERIOD 5 1:45pm	PERIOD 6 2:45pm	Graduation 3:45pm
First Choice:				ALL				ALL
Second Choice:				ALL				ALL
Third Choice:				ALL				ALL

**Mugs, shirts, and similar items will be available throughout the day for purchase at the Scout Shop.**

Please indicate below if you are seeking an Associate, Bachelor, Masters or Doctoral Scouting degree or if you will be entering the Doctoral degree program. This information is needed for your certificate. This means you:

1. Are registering for three (3) classes or classes totaling three (3) hours in the college in which you are seeking your degree.
2. Are registering for one (1) class in General Studies
3. Are registering for one additional class hour of instruction in the college of your choice
4. You are serving as an instructor or member of a support committee for the 2007 University of Scouting (Masters and Doctoral programs only.)

- Yes! I am seeking an Associate degree.  
 Yes! I am seeking a Bachelor degree.  
 Yes! I am seeking a Masters degree.  
 Yes! I want to begin the Doctoral program.  
 Yes! I am completing the Doctoral Program this year.

**Please indicate which college**

<input type="checkbox"/> Junior Studies (youth only) <input type="checkbox"/> Cub Scout College <input type="checkbox"/> Commissioner's College	<input type="checkbox"/> Boy Scout College <input type="checkbox"/> Venturing College <input type="checkbox"/> General Studies
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**Registration:**

\$12.00 by Oct. 10, 2008  
 \$15.00 after Oct. 10, 2008

**TOTAL FEE ENCLOSED:** \$ \_\_\_\_\_

**Lunch is NOT included.**  
 Local area vendors will provide various meal options for lunch at a reasonable price.

**Please return to:**

**Central Florida Council, BSA**  
**Wayne Densch Service Center**  
 University of Scouting  
 1951 South OBT, Suite 102, Apopka, FL 32703  
 (407) 889-4403, Fax (407) 889-4406

**Registrations received after October 16<sup>th</sup> will be treated as Walk-ins.**

**Method of Payment** (Fees **Do Not** include Accident & Sick Ins. Fees will be refunded if Service Center [407-889-4403] is notified **at least 24 hours BEFORE** the event.) Register online via the Central Florida Council Web Site at: [www.cfcbsa.org/uofs](http://www.cfcbsa.org/uofs) or Make checks payable to: Central Florida Council, BSA and (1) mail to above address [or] (2) fax [407-889-4406] with VISA or MasterCard.

Cash	Check #	Amount \$
Visa/MasterCard # _____	_____	_____
Expiration Date     /     /	Signature	F016