

## 2010 Regional Jamboree & Family Camp Volunteer Information Form

Volunteer Information	Volunteer Area	
Name _____	Program	Support
Address _____	Scout Competition	Dining Hall
City _____ State _____ Zip _____	Displays	Registration
Phone _____	Waterfront	Trading Post
e-mail _____	Event Staff Shooting Sports	Security
Date of birth: _____	Merit Badge Midway	Parking
Council _____ District _____	Sub Camp Staff	Medical
	Cub World	Equipment
	Program Area Judge	Transportation
	Aquatics	Site layout

**What day are you available for help?**  
**Thursday** \_\_\_ **Friday** \_\_\_ **Saturday** \_\_\_ **Sunday** \_\_\_  
**What would you like to do: First Choice** \_\_\_\_\_ **Second Choice:** \_\_\_\_\_  
**Specialist (Volleyball, Merit Badge Counselor, etc.)** \_\_\_\_\_

**Housing:**  
**I will stay in Jamboree Staff Camp. Yes** \_\_\_ **No** \_\_\_ .  
**I will stay with a Unit** \_\_\_\_\_ **Unit #** \_\_\_\_\_  
**Staying with a Unit and eating with them is acceptable. Order meal tickets if needed.**  
**Only register and buy tickets once.**

**Registration: I do not need to register again. Registered with Unit #** \_\_\_\_\_  
**COST OF REGISTRATION \$10.00 AFTER MARCH 30 \$12.00** Amount Paid \$ \_\_\_\_\_  
**Meal Tickets For Staff Only begin Friday, Dinner \$12** Meal Ticket \$ \_\_\_\_\_  
**Must be purchased prior to April 5**  
**Credit Card: MC Visa Discover Card #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Make Checks Payable to East Carolina Council, BSA** Check # \_\_\_\_\_

**Information:**  
Each registered staff member will be provided a staff hat and event patch. You must complete a Annual Health & Medical form and turn in at the Regional Jamboree Check In. Staff members are expected to set the example by wearing either the complete field or activity uniform including official Scout pants at the event.

Return to: East Carolina Council, BSA  
Regional Jamboree  
PO Box 1698  
Kinston, NC 28503  
Fax: 252-522-9707