APPLICATION FOR USE OF OBSR FACILITIES & EQUIPMENT

Minimum usage fees must be submitted two weeks in advance, along with this application.

PLEASE PRINT	(Select One)	Pack #	Troop #	Crew #	Other		
EVENT RENTAL	DATE		# of Youth _		# of Adults	Total	
(Check-in	6 to 9:30 P.M. (Central) F	riday and check-out b	y Noon Sunda	ay –exceptions for	Council/District events)	
Arrival Departure (Day, Date, Time) (Day, Date, Time)							
	(Day, Date,	Time)			(0	ay, Date, Time)	
Campsites Reque	ested		Cabins Requested		Facilities/Equipmer	nt	
Date Submitted for Approval Submitted by							
			s: One 21 years old or both at least 21. See \				
Name of Adult in Charge			Position				
Address			City		State	Zip Code	
Day Phone			Evening Phone		Cell Phone		
Fax #			Email				
Second Leader's Name			Cell Phone				
to Safe Scouting Campmaster upo	g, Section II, Aq n arrival at cam Prima	puatics Sa p. ry Leader	fety). A copy of the cert 's Signature	tifications are a	attached to this appli	ating activities (refer to the <i>Guide</i> cation and will be shown to the	
Retu	ırn this comple	ted applic	ation along with fees	at least two w	eeks prior to reque	ested use date to:	
			BUFFALO TRA 3501 E Lloyd Evansville	Expressway	· -		
Phone: 812.423.5246 Toll-Free 800.264.5246 Fax: 812.423.4845 Email: administration@buffalotracecouncil.org							
Permission to charge \$to unit account OR check (cash) enclosed in the amount of \$							
		Rece	eipt #	Date			
Council approv	val by			Position		Date	
Campmaster's	Name		Ce	ell			
						fund. Cancellations within vithin 48 hours of any event.	
CHECK-IN: Leader's Signat	ture			CHECK- Leader'			
Campmaster							

Write check-in and check-out comments on reverse side of this form

Event Code #6030 Rev 8/26/21