



Achewon Nimat Lodge
Order of the Arrow
 San Francisco Bay Area Council, BSA
www.achewonnimat.org

Winter 2010 ORDEAL RESERVATION FORM - MEMBERS

This reservation form is NOT valid for Ordeal candidates
 Package Plan members are already registered for this event

When: February 19 - 21, 2010
 Where: Rancho Los Mochos
 Check In: 8:30 PM to 10:00 PM
 Cost: \$ 12.50 per person
 Late Fee: Additional \$5.00 per person
 for reservations received after
 5:00 PM on February 12, 2010

All participants must have on file with the lodge or submitted with their reservation a SFBC Annual BSA Health and Medical Record (parts A, B, and C). The part B & C must be signed and dated. No other Health and Medical Forms are valid after December 31, 2009.

A Class-A uniform is to be worn at check-in and from Saturday dinner through the end of the event.

Remember to bring your own cup. We do not provide cups for any meal.

Inside sleeping accommodations are only available for the cooks and adults with medical issues (foul weather excepted).

Contact your unit leader or village adviser, if you need transportation.

(Please print)

Member's Name: _____ Phone: (____) _____

Email: _____ Unit: _____

Fee for Member		@ \$12.50	_____
Fee for 2nd Member	Name: _____	@ \$12.50	_____
Fee for 3rd Member	Name: _____	@ \$12.50	_____
Fee for 4th Member	Name: _____	@ \$12.50	_____
Late Registration Fee(s)	Number of late registration fees: _____	@ \$ 5.00	_____
Brotherhood Fee(s)	Number of members going for Brotherhood: _____	@ \$12.00	_____
Make checks payable to: BSA		Total Amount Enclosed	_____

Send Form & Fees to: Order of the Arrow
 SF Bay Area Council, BSA
 1001 Davis St
 San Leandro, CA 94577-1514

Additional Information Call:
 Charles Hoffman, Lodge Adviser
 (510) 655-2529 (after 5 PM)
 No refunds after February 12, 2010

Complete this information if paying by credit card	
Name of Cardholder: _____	Signature: _____
Billing Address: _____	Zip: _____
Card Type: _____	<input type="checkbox"/> VISA or <input type="checkbox"/> MasterCard
Card #: _____	Exp. Date: _____

Office use only

Rec.#: _____ Amount: _____ Date: _____ By: _____ Account: #034