

2008 SECTION W4B CONCLAVE



Please join us for a weekend of fun, fellowship, competition, and learning.

The Section W4B Conclave will be held May 2-4, 2008 at Mataguay Scout Reservation, hosted by Tiwahe Lodge.

The registration fee is listed below. You can enjoy well produced shows, great training experiences, some fun and serious competition, and a lot of fellowship and brotherhood with friends in the Order. Just ask a friend who has been to a Conclave about how great it is.

Follow these steps to register:

Step 1: Complete this flyer and mail it in, postmarked before April 1, 2007 or late fees will apply!

Step 2: Go to www.w4b.org and sign up for your classes. [When Registration Opens]

-----Cut and Mail -----

First Name	Last Name
Email Address	Chapter
Date Of Birth	NOTE: If you are under 18, the reverse side must be completed and brought with you to the event.

I am registering for the 2008 Section W4B Conclave:

☐ \$35.00 Registration Fee
☐ \$45.00 Late Registration Fee (April 1)
☐ \$Free Golden Arrow Membership

NOTE: Both OA Dues and Boy Scout Dues Must be paid prior to attending the event

Please mail checks payable to CIEC-BSA "For" Section W4B Conclave

Send completed form and payment to:
 2008 Section W4B Conclave – Cahuilla
 P.O. Box 8910
 Redlands, CA 92375
 Account No. 1-2371-000-00



Order of the Arrow Permission Slip

This form is to be turned in at Check-In of the Section W4B Conclave

**No Youth Under 18 will be allowed to participate in an Order of the Arrow function without a signed permission slip.
Scouts who appear to be ill will not be permitted to attend.**

My son _____ has permission to attend the following Order of the Arrow function: 2007
Section W4B Conclave. I authorize the adult leaders of the Order of the Arrow to obtain any emergency medical treatment or other assistance as needed.

Phone Number For Parent Or Guardian: Home: () _____ - _____ Cell: () _____ - _____	Alternate person to contact in case of emergency: Name _____ Phone: () _____ - _____
Person designated to pick up Scout if returning home early: Name _____ Phone: () _____ - _____	Medication, restrictions, or special instructions (If none, please write NONE): _____ _____

I have read, understood, and agree with this Authorization;

Print Name: (Parent/Guardian) _____ Signature: _____