



# HAUNTED WOODS

**Saturday, October 24 10AM-2PM**  
**Tunnel Mill Scout Reservation**  
**3913 Tunnel Mill Rd**  
**Charlestown, IN 47111**

**Saturday, October 24 10AM-2PM**  
**Pfeffer Scout Reservation**  
**1531 Cross Rd**  
**Benton KY 42025**

**Saturday, October 17 10AM-2PM**  
**Camp Crooked Creek**  
**950 Terry Dr**  
**Shepherdsville KY 40165**

*Come join us for our annual spooky,  
Haunted Woods!  
shoot monsters, explore haunted houses  
and enjoy Halloween themed events!*

***\$10 per Scout/Sibling/Adult***

**For more information and to register online, visit:  
[WWW.LHCBSA.ORG](http://WWW.LHCBSA.ORG)**



# 2020 Haunted Woods

## Registration Form



*This event will have limited capacity, social distances and a mask will be required for everyone over the age of 5 years old. This is a Day event only.*

This form needs to be fully completed and submitted prior to October 9, 2020 so that we can have an accurate count in order to assign and to accommodate your Pack's needs. Please provide a roster of everyone that will be attending with your unit (including siblings and parents). If you are unable to pre-register before the beginning date of the event, you will need to bring a copy of this form at check in before entering camp. *Units that pre-register should photo copy their completed form before submitting it to the Council Office and bring a copy to check in.* Registrations may be made via mail, fax, or e-mail below.

**Please check the Haunted Woods you plan to attend:**

- Saturday October 24<sup>th</sup>, at Tunnel Mill
- Saturday October 24<sup>th</sup>, at Pfeffer Scout Reservation
- Saturday October 17<sup>th</sup>, at Camp Crooked Creek



**COST:            \$10.00 per Youth/Adult**

**PACK #:** \_\_\_\_\_ **DISTRICT:** \_\_\_\_\_

**UNIT LEADER NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ST:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TOTAL YOUTH:** \_\_\_\_\_ **TOTAL ADULTS:** \_\_\_\_\_

Youth Name (First and Last)
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
<b>Youth Total</b> _____ x \$10.00 = \$ _____
Adult Name (First and Last)
1
2
3
4
<b>Adult Total</b> _____ x \$10.00 = \$ _____

<b>Name on Credit Card:</b> _____
<b>Billing Address:</b> _____
<b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____
<b>Amount to be charged:</b> _____
<b>Credit Card Number:</b> _____
<b>Card Expiration Date:</b> _____
<b>CVC (Code on back of card):</b> _____

Mail this in:  
**Lincoln Heritage Council**  
**Attn: 2020 Haunted Wood Registration**  
**12001 Sycamore Station Place**  
**Louisville KY 40299**  
 Fax this in:  
**502-361-7899**

Acct Code:  
 1-6801-086-20 TMR  
 1-6801-287-20 PSR  
 1-6801-286-20 CCC

Email this in:  
[susie.rausch@scouting.org](mailto:susie.rausch@scouting.org)