



**Camp Pahatsi
Unit Site Rental / Work Project
2012**

Since camp Pahatsi's closure in 2002, many Scouting families and units have never experienced the great outdoors at this Boy Scout facility. We would like to invite you to visit us at camp. We are taking reservations for families, and Scouting units to use camp in exchange for service work hours.

In preparation of the reopening of camp Pahatsi, work NEEDS to be done to remove fallen trees, restore electrical needs, repair the water system, and conduct normal maintenance.

Please help us by donating your unit's time to help us maintain, rebuild and improve your camp in lieu of a rental fee. The dates are published below. Please select a project from the attached list that is appropriate for your unit's size and its abilities. Please arrange for needed tools and material for the project. As a rule of thumb, please set aside 2-3 hours per day reserved to be used for camp projects. Please contact the campmaster listed below for specific questions or special requests.

Let's all pitch in to make OUR camp usable and beautiful for everyone!

CAMPMASTER: Kathy Neuberger

Email: istahap@jps.net

Phone: (916) 768-3274

Possible items to bring: Wheel barrels, hammers, shovels, rakes, hoes, screw drivers, nails, sandpaper, paintbrushes, log splitters, chippers, power drills, power saws, Chainsaws, circular saws, and other work / garden tools or equipment.

**CAMP PAHATSI
CAMP RESERVATION FORM 2012**

JOIN US THIS YEAR AT PAHATSI!

UNIT NUMBER _____

please circle one: **PACK TROOP TEAM CREW**

NUMBER OF PEOPLE WORKING: _____

CONTACT PERSON: _____

DAYTIME PHONE NUMBER: _____

EMAIL ADDRESS: _____

PROJECT SELECTED (Needs to be from the approved list attached approved)



DATE SCHEDULED TO DO THE PROJECT ABOVE: _____

I respectfully submit this form as a commitment to provide the above stated number of people to do the stated project as approved by the property listed persons above. We will complete the project as described to the best of our ability and use the materials stated.

Signed Name

Date

Printed Name

OFFICE NOTES:



*Please turn form in to the Program
Department : Kimberly Easton*

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