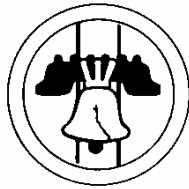


BLUE HILLS MERIT BADGE CLINIC

HOSTED BY TROOP 45



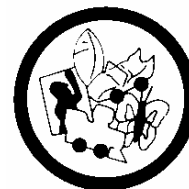
**CITIZENSHIP IN
THE
COMMUNITY
A.M. & P.M.
SESSIONS**



**CITIZENSHIP
IN THE
NATION
ALL DAY
SESSION**



**CITIZENSHIP
IN THE
WORLD
ALL DAY
SESSION**



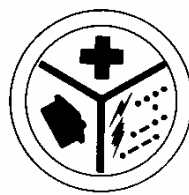
**COLLECTIONS
A.M. & P.M.
SESSIONS**



**COMMUNICATION
ALL DAY SESSION**



**DOG CARE
A.M. & P.M.
SESSIONS**



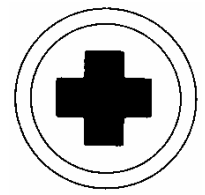
**EMERGENCY
PREP
ALL DAY**



**FAMILY LIFE
ALL DAY**



**FINGERPRINTING
A.M. & P.M.
SESSIONS**



**FIRST AID
ALL DAY**



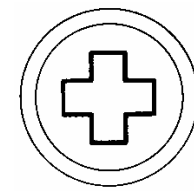
**LAW
ALL DAY**



**PERSONAL
MANAGEMENT
ALL DAY**



**RADIO
ALL DAY**



**SAFETY
ALL DAY**



**CUB SCOUT &
BOY SCOUT
LEADER TRAINING
A.M. SESSIONS**

LOCATION: Ladysmith High School, 1700 Edgewood Ave. E.
(Hwy 8 East) Ladysmith, WI

DATE: October 24, 2009 (Saturday) Deadline: Oct. 19

TIME: Registration 8:30 a.m.
A.M. Session 9:00 - 12:00
Lunch 12:00 - 12:30 (Everyone should bring a sack lunch
and drink.)
P.M. Session 12:30 - 3:30

FEE: \$3.00 per Scout – each session is limited to 15 scouts

Cooking demonstration:
10:00 A.M. – 2:00 P.M. in front of high school

CS & BS Leader Specific Training – A.M. Sessions only –
\$10.00 fee (includes book)

Substance Abuse Training – A.M. (no fee)

Prerequisites:

First Aid – bring a home first aid kit #2b

Personal Management - #1, #2, #8, #10

Arrive in Scout Uniform. Bring necessary merit badge books.
Bring a sack lunch and drink.

PLEASE PRE-REGISTER through Terri at the
Council Service Center
715-832-6671 or fax 715-832-6711 or
email: tjay@bsa-cvc.org (preferred)

Please use the reservation form included.

Each scout is asked to bring a non-perishable food item
for the local food bank. This will help make a nice
Thanksgiving for many people.

October 24, 2009 Blue Hills District Merit Badge Clinic Registration

Troop: _____

Contact Person's Name: _____

Phone: _____

Address: _____

Email: _____

Troop Roster: (Make as many copies as needed)

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	

Email, Call, or Send Troop Roster to:
Chippewa Valley Council
710 S. Hastings Way
Eau Claire, WI 54701
Phone: 715-832-6671
Fax: 715-832-6711
Email: tjay@bsa-cvc.org

Submit your roster before the October 19 deadline.
Classes will be filled on a first-come first-served basis.
Your troop Contact Person will be notified via email or
phone as soon as possible concerning registration
status.