

Offered by: Rush-Henrietta Central School District • Continuing Education Office

BSA Swimming Ability Test

Scouts can complete their swim test before arriving at camp and avoid the long wait at Cub Adventure Camp or Massawepie*. Bring your scouts to this Seneca Waterways-approved pre-swim test. Troops and packs going to scout camp may any either session listed below. Remember, adults attending camp need to be tested as well. During your swim time, you will have the opportunity to complete the *Beginner* or *Swimmer* test as outlined by the Boy Scouts of America.

A Pack or Troop representative must register all scouts and/or adults as a group upon arrival.

No pre-registration is required. Using the registration form below, please indicate the number of people taking the test. Pay for all with one payment upon arrival.

Leaders must be prepared to complete the registration form below and the official *Pre-Camp Swim Record* when you arrive. Blank forms will be available at the test. To ensure the accuracy of the forms, please check in and pay only after your entire group has arrived.

#SW 0045 1 Friday 06/10/11 8:00–9:00 P.M.

#SW 0056 1 Saturday 06/18/10 12:30–2:00 P.M.

#SW 0067 1 Sunday 06/26/10 12:30–2:00 P.M.

Location: R-H High School Pool, 1799 Lehigh Station Road, Henrietta

Cost: **\$3 per person**

*If participating in any waterfront merit badge, the scout must complete this ability test at camp.

R 3/11/11

Please organize your unit and arrive as a group. Thanks!

Registrations will be accepted at the door.

Bring your payment with this completed form.

Seneca Waterways will NOT accept registrations.

Payment options:

Cash



Check

MasterCard or Visa



Questions?

Call 359-7805

PLEASE PRINT		PLEASE PRINT		SPRING 2011	OFFICE USE
Unit Representative's First Name		Last Name		Date Posted	Date
Street Address					
Home Phone		Work or Cell Phone (circle one)		#	
Troop #	Pack #	or			
Course #	Course Name			Total Due	
SW _____	BSA Swimming Ability Test _____ people x \$3.00/each =			\$ _____	
				TOTAL	
For additional registrations, please make copies of this form.					
Method of Payment: I authorize you to charge my <input type="checkbox"/>  or <input type="checkbox"/> 					
Card #	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Print cardholder name _____			Card Expiration Date _____ (MM/YY)		
Cardholder Signature _____			3-digit Authorization # _____ (from back of card)		
<input type="checkbox"/> Check (payable to R-H Schools) Ck # _____			<input type="checkbox"/> Cash (in person only) Receipt # _____		

Don't forget!