

**Pathway to Adventure Council Announces:
2018 PTAC Contingent to
Philmont High Adventure Base**

137,000 acres – 214 square miles of rugged back country in the Sangre de Cristo Mountains near Cimarron, New Mexico

Participants **MUST BE** 14 years old OR have completed 8th Grade and be at least 13 by July 6th, 2018. Twenty four spaces are available to individuals, troops, crews or teams, including Co-ed crews. Partial units & solo Scouts are encouraged to sign up; one application must be completed for each participant. Adult positions are also available. Note: Registration closes April 28th, 2017. All applications are subject to PTAC High Adventure Committee approval.



Leave Chicago, Friday, July 6th
Depart Philmont/return to Chicago, Friday, July 20th
Approximately \$1,850 per person**
(price subject to change)

*Includes Philmont Fee, transportation, meals, lodging, 10 mile hikes, Cooking/Contingent Weekend Shakedown, Training/Planning, Trail T-shirts, Philmont Belt & Buckle, Philmont Crew photo and more.

Payment Schedule:

1. \$375 with Request for Application
2. \$450 on April 30th, 2017
3. \$450 on October 1, 2017
4. \$350 on February 15, 2018
5. \$225 on May 1st, 2018 (*estimated*)

Forfeiture Policy:

1. Cancel before April 1st, 2017: forfeit \$375
2. Cancel before May 1st, 2017: forfeit \$825
3. Cancel before November 1st, 2017: forfeit \$1,275
4. Cancel before February 15, 2018: forfeit \$1,625
5. Cancel after May 1st, 2018: forfeit \$1,850

If you cancel, you are obliged to find a qualified replacement. Fees already paid are transferable. All replacements must be approved by the Council High Adventure committee and by the PTAC Contingent leadership. No replacements will be allowed 30 days before departure; full payment is forfeited. Camperships to cover a portion of the trip cost are available.

NOTE: ALL CANCELLATIONS must be submitted *in writing* to the Program Office at PTAC!

For more info/questions: cathlynn.peters@scouting.org / 312-421-8800 ext 300

2018 Philmont Request for Application (Application will be e-mailed)	
Name _____	Age on 7/6/2018 _____ DOB ____/____/____
Address _____	Home Phone: _____ - _____ - _____
City _____	State: ____ Zip: _____ Cell: _____ - _____ - _____
Troop/Crew/Team# _____	Parent E-mail: (Required) _____
Due to LIMITED SPACE in the contingent, excess applications will be placed on a wait list.	
<u>Make Checks payable to and MAIL TO:</u> BOY SCOUTS OF AMERICA Suite 101 / Camping Dept. 617 E. Golf Road Arlington Heights IL 60005	Unit Leader Approval: _____ Scoutmaster Signature
Account # 1-6801-073-20	
(Rev 12/6/16)	