

Colonial Virginia Council
2021-22 Merit Badge University
October 9, 2021 & January 15, 2022



Student Registration (Print Legibly)

Name	District (Council if not in CVC)	Unit
Address		
City	State	Zip
Email	Phone	
BSA ID Number		

Class Selection

- Select your choice for morning classes by printing a 1, 2, 3, etc. respectively in the column to the left of the merit badge name.
- Select your choice for afternoon classes by printing a 1, 2, 3, etc. respectively in the column to the left of the merit badge name.
- Assignments are made on a first-come, first-served basis until classes are full.
- Missing a session will result in only a partial completion of a merit badge. Attendance at both sessions is expected.

Morning Class		Afternoon Class	
	Citizenship in the Nation		Citizenship in the Nation
	Citizenship in the World		Citizenship in the World
	Coin Collecting		Cooking
	Cooking		Environmental Science
	Environmental Science		Emergency Preparedness
	First Aid		First Aid
	Personal Management		Soil and Water Conservation
			Sustainability
	NO MORNING MERIT BADGE		NO AFTERNOON MERIT BADGE

Scoutmaster/Unit Leader

The above named Scout is a registered and active member of our Troop, Ship, or Crew. My Troop, Ship, or Crew staff will take measures to ensure the Scout understands his or her responsibility in exemplifying Scouting ideals and behavior while a guest at MBU. **The Scout will come to class with the appropriate merit badge pamphlets and properly filled-in (and signed) Merit Badge Applications (known as Blue Cards) or proof of an entered Unit Leader signature in Scoutbook.**

Unit Leader's Printed Name		
Address		
City	State	Zip
Email	Phone	

Parent/Guardian Permission

I hereby authorize the above named Scout to attend and participate in the Colonial Virginia Council Merit Badge University. In case of emergency, I understand every effort will be made to contact me (or an adult I designate), but in the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Parent/Guardian Printed Name		Parent/Guardian Signature	
Emergency Contact	Name (Should be a Parent/Guardian)	Relationship	Phone Number

Registration Information

Registration Fee: \$12.00 Per Class/\$24 for Full Day	Registration Deadline: October 2
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