

EXPLORING™

DISCOVER YOUR FUTURE

EXPLORING FEE CALCULATION WORKSHEET

Unit Type: _____ Unit Number: _____

Payment Method: _____ Cash or _____ Check Fee Paid

by: _____ Receipt # _____ Received

by: _____ Date received _____

	Item	Quantity	Fee/Person	Total
1	Paid Youth		\$33.00	
2	Paid Youth Insurance (required)		\$6.00	
3	Paid Adults		\$33.00	
4	Paid Adult Insurance (required if not covered by sponsoring organization)		\$6.00	
5	<i>Subtotal</i>			
6	Unit Liability Insurance Fee			\$40.00
7	Grand Total			



BOY SCOUTS
OF AMERICA®
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