

**Camp Kootaga**

**2026 Camp Site Reservation/Deposit Form**

*For the year 2026, the camp reservation deposit will be \$100.00. This deposit will be applied to your 2026 total camp fees.*

**Site preference will be considered. Camp Kootaga reserves the right to place the Unit in any campsite.**

Council: \_\_\_\_\_ District: \_\_\_\_\_ Unit #: \_\_\_\_\_

Leader's Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Person Making Deposit: \_\_\_\_\_

Position: \_\_\_\_\_

Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Estimated # of Participants:      Scouts: \_\_\_\_\_ Adults: \_\_\_\_\_

Unit Type:      Male Troop: \_\_\_\_\_ Female Troop: \_\_\_\_\_ Family: \_\_\_\_\_

Our Unit will be eating In the Dining Hall: Yes: \_\_\_\_\_ NO: \_\_\_\_\_

Our Unit will be bringing our food and will be doing our cooking in our Camp Site: Yes: \_\_\_\_\_ No: \_\_\_\_\_

Our Unit will be Bringing our own tents: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Camp Site:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Email completed form to: [info@campkootagafoundation.org](mailto:info@campkootagafoundation.org)**

**Deposit can be mailed to:      Camp Kootaga Foundation  
PO Box 5155  
Vienna WV 26105**

**\*Reservation Fees must be submitted no later than 10 days after receipt of form.**

Office Use Only  
Date Received \_\_\_\_\_  
Received by \_\_\_\_\_  
Fees \_\_\_\_\_

