



NISQUALLY LODGE #155

ORDER OF THE ARROW

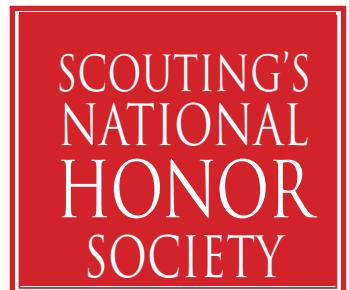
CANDIDATE ORDEAL REGISTRATION FORM

Congratulations on your election as a candidate for membership in the Order of the Arrow and Nisqually Lodge #155! Your election is only the first step on your journey in the Order of the Arrow. To receive membership rights, you must now undergo the Ordeal. Please choose from one of the three Ordeals for 2026 and complete the form below. The cost of the Ordeal is \$60.

Winter Ordeal (March 20-22 Camp Thunderbird) *Registration Deadline is Friday, March 13*

Spring Ordeal (June 5 - 7 Camp Thunderbird) *Registration Deadline is Friday, May 22*

Summer Ordeal (August 14-16 Camp Thunderbird) *Registration Deadline is Friday, July 31*



Please arrive at Camp Thunderbird Friday afternoon between the hours of 6 pm and 8 pm. Dinner will not be served Friday night, so please eat before you arrive. Activities will begin at 8 pm so please do not be late. The Ordeal weekend officially concludes Sunday morning at 10 am. Parents should plan on picking up their scouts between 10 am and 11 am. Please bring complete Scout uniform, sleeping bag, ground cloth/tarp, rain gear, toiletries, change of clean clothes, heavy footwear (boots), work pants, work shirt, old jacket, work gloves, flashlight, and watch.

There will be a Trading Post with Order of the Arrow Nisqually Lodge t-shirts, hats, patches, etc. These items are not available in the Scout Store and only available at Order of the Arrow events.

Camp Thunderbird is located at 11740 Summit Lake Rd, Olympia, WA 98502.

Registration Form

Register on-line at <https://scoutingevent.com/612-Ordeals2026> or by mail or in person at the Pacific Harbors Council Creighton Scout Service Center, 4802 South 19th Street, Tacoma, WA 98405. Program Desk Hours: Monday-Friday: 9am-5pm. Please make checks payable to Pacific Harbors Council.

Name: _____ Phone#: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Unit Type: _____ Unit #: _____

Birthday: _____ Indicate Your Ordeal: Winter (3/20-22) \$60 Spring (6/5-7) \$60 Summer (8/14-16) \$60

Emergency Contact: _____ Phone#: _____

Alternate Contact: _____ Phone#: _____

District: Olympic Rainier

Medical Release

The undersigned authorizes Pacific Harbors Council or registered adult leader to consent to medical treatment at the advice of qualified medical personnel in the event of a medical emergency and the undersigned not being able to be contacted. This authorization will remain effective while the minor is in route to or from, or involved or participating, in the above described activity.

Date: _____ Printed Name: _____ Signature: _____

Are your immunizations current? No Yes

Are you on medication? No Yes, please list: _____

Please list any food allergies or special considerations needed: _____

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Registration subject to the Lodge refund policy. _____

Cost Code: 900017