

CUB SCOUT PACK

SCOUT JAM 2010 REGISTRATION FORM

Unit #: _____

Contact Person: _____

District: _____

Phone number: _____

e-mail address: _____

Number of Day Camper youth _____ @ \$5 total: _____

Number of Day Camper adult _____ @\$5 total: _____

Number of overnight campers _____ @\$5 total: _____

Total due: _____

All fees and registration form must be submitted by March 1, 2010 to:

Gulf Coast Council
9440 University Pkwy
Pensacola, FL 32514
Fax: 850-476-6337
www.greatdaytobeascout.org