

Pack 3649 Adult (New or Returning) Registration

Leader's
Name _____ **Birthday** _____

Pack Position _____

Home Address _____

Mailing Address _____

Phone Number _____ **Mobile Phone/home phone**
Text Y/N _____

Phone Number _____ **Mobile Phone/home phone**
Text Y/N _____

Email Address _____

Most of our correspondence is via email. Please check your email at least weekly!

Please indicate the best method of contact _____

Additional Information or Comments:
