

CUB SCOUT PACK 173 REGISTRATION FORM

PLEASE PRINT ALL INFORMATION

Annual Dues are \$85.00. Please make check payable to "Cub Scout Pack 173"

Please mail all forms and payment to: Cub Scout Pack 173, 225 W. Wissahickon Ave Flourtown Pa 19031

New Scout / Returning Scout (circle one)

Shirt size: (circle one) Youth Small Youth Medium Youth Large

Boy's Name: _____

Address: _____

Telephone Number _____ Date of Birth _____

E-mail Address: _____

Secondary E-mail: _____

School: _____ Teacher: _____ Grade: _____

Parent's/Guardian's Name(s): _____

Den Leader, if known: _____ Den Number, if known: _____

If parents/guardian do not reside together and you would like pack mailings and emails sent to more than One address, please check ___ and list secondary address, phone number, email on back

Parent's previous scouting experience and rank attained: _____

Cub Scout Leadership is 100% Volunteer. Without Volunteers the Pack cannot Go or Grow!

Cub Scouts is a family volunteer based program. In registering my son for Pack 173, I understand that I will be called upon to help with Den and Pack activities.

PARENT/GUARDIAN SIGNATURE: _____

With this in mind we are asking that each boy's parents make a commitment to assist the program in some way. Please select from one of the areas listed below. If you have any questions about what is involved, please ask. (*Italicized* are individual; all others are committee) Please circle at least one. Thank you.

<i>Cubmaster</i>	<i>Assistant Cubmaster</i>	<i>Den Leader</i>	<i>Assistant Den Leader</i>	<i>Secretary</i>	<i>Treasurer</i>
Fundraising	Rocket Launch	Pack Meeting Activities	Committee Member		Pinewood Derby
Blue & Gold Banquet	Holiday Party	Family Camping Trip	Newsletter	Website	