

ACTION SCOUTS SIGN UP FORM

My unit would like to support the following event:

Date(s) materials needed: _____

We would like to request the following materials:

Campaign (please check as many as needed)

Color guard banners Parade banners Backdrop banners

Table banners Water Bottle Rocket Launchers

Hot Spark Kits Marshmallow launchers/targets

District _____

(Check one) Pack # _____ Troop # _____ Crew # _____

Name: _____

Scouting Position: _____

Address _____

City/State/Zip _____

Phone (H) _____ E-mail _____

Please check which activities your unit will participate in:

___ Be in a parade

___ Have a booth to promote Scouting to the general public

___ Host a community event for the general public

•Service project

•Town Alumni Event

•Other event: _____

___ We are willing to offer to help at an activity to promote Scouting if you need it. We are willing to travel ___ miles.

___ We have a trained color guard with full uniform that are willing to travel to events if needed for flag or other ceremonies. We are willing to travel ___ miles.

Return form to your district executive, OR

100th Anniversary,

Crossroads of America Council

1900 N. Meridian Street,

P.O. Box 1966,

Indianapolis, IN 46206-1966

(877) 925-1900 TOLL FREE • www.crossroadsbsa.org

AMBASSADOR SIGN UP FORM

Date(s) materials needed: _____

District _____

(Check one) Pack # _____ Troop # _____ Crew # _____

Name: _____

Scouting Position: _____

Address _____

City/State/Zip _____

Phone (H) _____ E-mail _____

I will adopt the following locations:

SCOUT PARENT GUIDE SIGN UP FORM

District _____

(Check one) Pack # _____ Troop # _____ Crew # _____

Name: _____

Scouting Position: _____

Address _____

City/State/Zip _____

Phone (H) _____ E-mail _____

Scouting unit chartered organization: _____

Scout unit meeting dates/times: _____

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