

To register, please fill out and tear off bottom portion and send to NWSC Service Center(600 North Wheeling Road, Mount Prospect, Illinois 60056) or fax to (847) 824-6925

Please turn in no later than September 19th.

Name: _____ Phone Number: _____ Troop: _____

Address: _____

E-mail address _____ Age: _____

Chapter _____ Honor _____

If you are under the age of 18, you will need a parent's signature in the space provided below:

Parent Signature: _____ Date: _____

Emergency Phone: (____) _____

Transportation Info:

I am driving and I have room for _____ Arrowmen.

<OR>

I need a ride _____

There will be two times to leave. 5:30 and 7:00 on 9/21 both from the council office.

I am leaving at 5:30 _____

I am leaving at 7:00 _____

I will find my own transportation _____

Payments

\$30.00

Checks made out to NWSC