

Troop 115 Event Sign-up Sheet

Event/Activity:	
Date:	Time:
Scout Coordinator Name:	Phone Number:
Adult Coordinator Name:	Phone Number:
Event Location:	Meeting Location:
Cost Per Person:	Payment Due Date:

#	Scout / Leader Name	Patrol	Phone	Email	Paid Y/N	Med Form
1						
2						
3						
4						
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Troop 115 Event Sign-up Sheet

#	Scout / Leader Name	Patrol	Phone	Email	Paid Y/N	Med Form
19						
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25						
26						
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