

Goshen Registration form

Scout Name _____

Age _____ Rank _____

Parent Email _____

Parent phone _____

Adult Volunteer Name _____

Email _____

Phone _____

Emergency Contact _____

Dates available to volunteer _____

Goshen Checklist

Scout

- Registration form
- Medical forms ABC
- Copy of Insurance card
- Payment on Troop Website

Adult

- Registration form
- Medical forms ABC
- Copy of Insurance card
- Youth Protection training