



White Stag Candidate Registration – 2010



Fill out the form below and mail it with your deposit (or full fee) and medical form to:
White Stag Crew 122 Registrar, 990 Snyder Lane, Walnut Creek, CA 94598
Make checks payable to White Stag Crew 122.

NAME: _____
(Last) (First) (Middle Initial)

ADDRESS: _____
(Street) (City) (Zip Code)

DATE OF BIRTH: _____ HOME TELEPHONE # (____) _____

PARENT(S) NAME: _____ PARENT CELL PHONE(S) _____

PARENT E-Mail (s) _____

EMERGENCY CONTACT-NAME: _____ PHONE (____) _____

HOME TROOP # _____ COUNCIL _____ CURRENT SCOUT RANK _____

TROOP LEADER'S NAME: _____

TROOP LEADER'S PHONE: _____ E-MAIL _____

PREVIOUS WHITE STAG EXPERIENCE: _____

OTHER LEADERSHIP EXPERIENCE: _____

OVERNIGHT CAMPING NIGHTS: _____ BACKPACKING MILES: _____

FOOD/MEDICINE ALLERGIES OR ISSUES: _____ VEGETARIAN? _____

PROGRAM PLACEMENT:

Patrol Member Development - PHASE I (ages 11-12) _____

Patrol Leader Development - PHASE II (ages 12-14) _____

Troop Leader Development - PHASE III (ages 14-17) _____

If you want your phone number and e-mail released to other candidates who want to carpool,
check here _____

T-shirt size: S M L XL (circle 1) T-shirt included in camp fee

FOR STAFF USE ONLY:

Medical Form _____ Fee Deposit _____ Full Fee _____