

ORDER OF THE ARROW NATIONAL LEADERSHIP SEMINAR

May 2 - 4, 2008 Camp GUYASUTA, PA



PARTICIPANT REGISTRATION FORM

Please print or type the information below with your name printed in full. No individual confirmation notice will be mailed. You may reproduce this registration form locally. A copy of this form must be sent for each participant.

Name: _____
(First, Middle Initial, Last Name)

Address: _____
City: _____ State: _____ Zip: _____

Phone: (____) _____ Date of Birth: _____

EMAIL: _____

Council: _____ No. _____

Lodge: _____ Section NE - _____

OA Position: _____ Attendance Priority: _____

Check one: Male _____ Check one: Adult: _____
Female _____ Youth: _____

COUNCIL ATTENDANCE APPROVAL:

Signature: _____
Scout Executive (Staff Adviser or Lodge Adviser)

Please attach this registration form with your payment of \$65.00, made payable to Northeast Region BSA and mail to:

Northeast Region, BSA
PO Box 268
Jamesburg NJ 08831-0268
Attn: Program Secretary
Fax: (609) 655-3699

In compliance with the Americans with Disabilities Act, the Boy Scouts of America will make all reasonable efforts to accommodate persons with disabilities at its meetings. Please call the Program Secretary at the regional office at (609) 655-9600 Ext 226 with request.

Deadline: _____ Account # 62007-9385

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T-SHIRT ORDER FORM



Would you like to have a Northeast Region NLS T-Shirt? List the number, size (L, XL, 2XL, or 3XL), and quantity below. The L and XL are \$12.00 each. The rest are \$14.00 each. Sizes above XL may be a different color. The shirts will be available for pick up during Saturday morning session breaks.

LODGE NAME: _____, Council _____

Name	Size			Quantity	
	L	XL	2XL, 3XL		
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
				=====	
				TOTAL _____	\$ _____
				Amount included:	\$ _____

Please include this form and the money with your registration. Should be received at least 2 weeks prior to the seminar. Make your check payable to Northeast Region BSA and mail to:

Northeast Region, BSA
 PO Box 268
 Jamesburg, NJ 08831-0268
 Attn: Program Secretary

Phone (609) 655-9600 Fax: (609) 655-3699

Account #67009-9385