

Registration Form

MSA State (Spring/Fall) Campout

(Date)

(Campout Location)

(Campout Address)

Fees:

Activity fee (pre-registration) \$25.00

OR

Activity fee (paid at gate) \$30.00

Camping fee (payable at the gate): \$_____ per night

Early Arrivals: \$_____ per night

NOTE: Total fee in advance is appreciated.

NO REFUNDS of pre-registration activity fee

Checks will be accepted at the gate.

Closing date for registration: (Date)

Mail Registration to:

Name _____

Address _____

City, State, Zip _____

Phone _____

Email Address _____

Registration for State (Spring/Fall) Campout at _____

Name: _____ Phone _____

Address: _____

City: _____ State/Prov. _____ Zip _____

Go Green—your mailback will be sent to your email address provided below:

Email Address: _____

Chapter Name: _____ Chapter No. _____ M.A.L. _____

Type of unit _____ Length _____ ft No. of slide outs _____

_____ We are handicapped and MUST be in Handicapped area. We understand that we will not be with our chapter. We have a valid state handicapped certificate, license, or doctor's certificate.

of Teens _____ # of Youths _____ (please provide names and ages on back)

Enclosed is:

Pre-registration activity fee: \$_____ (\$25.00)

Camping fee: \$_____ (\$_____ per night)

Early arrival: \$_____ (\$_____ per night)

Total enclosed: \$_____

Make check payable to 20__ MSA State (Spring/Fall) Campout