ROCKET INTO SCOUTING
METACOMET DISTRICT
29 September 2018

ROSTER PACK _____

Contact Person:					
	Phone No.:				
First Name	Last Name	ADULT	SCOUT	Sibling	PAID

Total Youth: _____ X $5 = $ _____

Total Adult: _____ X $5 = $ _____

Total Siblings: _____ X $5 = $ _____

Total Attendees: _____ **Total Remitted: $**_____

Office Use Only
SW: =6461 Rec'd: _____

$5 if paid before Sept. 16th $7.50 after