



Troop Representative Registration Form

Representative Information

Name:		Email:	
Address:			
City:	State:	Zip Code:	
Phone: ()	Unit Number:	Circle O/B/V: Ordeal Brotherhood Vigil	
Circle Chapter:	Amangi Newo (Hemlock)	Canotka (Cape Fear)	Eluwak (Mawat)
	Eno (Orange)	Impeesa (Baden Powell)	Kato Hochuli (Falls)
	Lumbee Anilorac (Kia Kima)	Natisihi (Moore)	Netami (Crosswinds)
	Neusiok (Neuse River)	Niganit (Tuocs)	Yamni Wakpa (Three Rivers)
	Wazeeyahtah (Great Northern)		

Scoutmaster Approval

Signature:	Term of Position:
Date:	Phone:

Form Submission

Submit to:

Troop Rep. Committee Chairman
(See section A for contact information)