First Name: Last Name: Nickname: Patrol: Date of Birth: School: Grade in school (2015-2016): 9th Earned Arrow of Light? Yes Address - Street: Address - City: Address - Zip: Home Phone #: Email address: Do you want this email address included in the Troop 457 email distribution list? Addult Information: Adult Information: Adult 1 Adult 2 First Name: Last Name: Relationship to Scout: Mother Father Father Father Other Other Other Other Address - Street: Address - City: Address - City: Address - Street: Address - Zip: Home Phone #: Email address: Cell Phone #: Email address:				
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Relationship to Scout: Mother				
Father	Relationship to Scout:	Mother	Mother	
Please enter "same" if the following is that same as Scout's: Address - Street: Address - City: Address - Zip: Home Phone #: Email address:	•	Father	Father	
Address – Street: Address – City: Address – Zip: Home Phone #: Cell Phone #: Email address:		Other	Other	
Address – City: Address – Zip: Home Phone #: Cell Phone #: Email address:	Please enter "same" if the following is that same as Scout's:			
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Address – Zip: Home Phone #: Cell Phone #: Email address:	Address – City:			
Cell Phone #: Email address:				
Email address:	Home Phone #:			
Email address:				
Do you want this email address Yes, please. Yes, please.				
included in the Troop 457 email No, thanks.		∐No, thanks.	∐No, thanks.	
distribution list?				
Driver's License #:				
Car year/make/model:				
I ! D1 - 4 - 44 - 1				
License Plate #:				
# Passengers car can carry:	Insurance coverage amount (Liability):			