



Registration Form:

Note: When more than one session is available, please indicate the session you will attend.

Name: _____ Troop Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Scoutmaster _____

Merit Badge _____ Session: _____

Merit Badge _____ Session: _____

Merit Badge _____ Session: _____

Merit Badge _____ Session: _____

Email address _____

(e-mail addresses are collected only to confirm registration, pass along additional information, and alert you to new opportunities. This information will not be traded or sold.)

Mail completed registration form with check to:

Merit Badge Workshops

c/o Carol Forrest

414 15th Street West

Hastings, MN 55033-2734