

# A Taste of Camp Registration Form

Registration Deadline: May 19, 2008

Name of Person making Reservation: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_ # of participants x fee of \$3.00 each = \$ \_\_\_\_\_

Total Cost of Event = \$ \_\_\_\_\_

<p><b>FOR OFFICE USE ONLY</b></p> <p>Confirmation Date: Mail _____ Email _____</p> <p>Date _____ Amount Enclosed _____ Receipt # _____</p>	<p style="text-align: center;"><b>DATE RECEIVED</b></p>
--	---

**Please write a complete roster of participants and state whether they are a registered member of Girl Scouts or not. Thank you**

Name	Registered Member Circle one	Name	Registered Member Circle one
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO
	YES NO		YES NO

During Taste of Camp 2007 the Amahami Patch Program was introduced. Every participant receives a patch or a segment. The patch for their first time, a segment each time after that. Please tell us how many patches or segments you will need.

**Number of Amahami Patches: \_\_\_\_\_ Number of Taste of Camp Segments: \_\_\_\_\_**