

Pack or Troop Number: _____
(circle one)

Adult Leader Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

Youth Attendance _____

Adult Attendance _____

Total _____ X \$7.00= _____

Mail Pre-registrations To:

Trailblazer Spring Camporee
Chippewa Valley Council, B.S.A.
710 South Hastings Way
Eau Claire, WI 54701

Or bring with you to the Spring Camporee.

