2010 MERIT BADGE PRE-REGISTRATION

Please mail/fax this form to camp two weeks prior to arrival.

YOU MUST CHOOSE A 2nd CHOICE FOR EACH SCOUT. WE CANNOT GUARANTEE THEY WILL GET THEIR FIRST CHOICE.

In an effort to provide quality instruction and the merit badges your scouts want, complete this form. List a **First** and **Second** choice for each time slot. Choices will be honored until a session reaches capacity. If neither Merit Badge is available, at that time, you will be contacted by E-Mail.

Mail to: L.E.Phillips Scout Reservation
2900C 16th Street
Rice Lake, WI 54868

Camp Fax Number is 715-234-1147
DATE FORM RECEIVED __________

TROOP # ________________ Week Attending Camp _________________ Council ______

Contact Person:
Name ____
Address ____
E-Mail Address ____
Phone # ____

(Make copies of this form as needed.)
Please Print.

Scout's Name	**Time of session**	**1st Choice**	**2nd Choice**

Make copies of this form as needed. (PLEASE PRINT)

Scout's Name	**Time of session**	**1st Choice**	**2nd Choice**