

SCAVVIES INFORMATION

THIS MUST BE COMPLETED BY ALL SCAVVIES PRIOR TO THE INITIATION

DATE: _____

FIRST NAME: _____ LAST NAME: _____

ADDRESS _____

CITY _____ STATE _____

PHONE: _____

AGE _____ DATE OF BIRTH: ____/____/____

DAV MEMBERSHIP NUMBER _____

DUGOUT GOING INTO _____

\$20.00 PART LIFE PLUS \$ _____ .00 REGISTRATION FEE

TOTAL \$ _____ .00

AMOUNT PAID \$ _____

PERSON RECEIVED MONIES _____ REGISTRATION DESK ONLY

I understand that one of my sponsors must walk me through the Third Degree. Failure to do so will make me ineligible for the Third Degree, and I will not be a member of the NOTR until such time.

SCAVVIE SIGNATURE

DATE

Remarks by the registration desk: