

Date: _____

Cub Scout Pack 566 Info Form

Rev: 9/01/19 ml

Food Preference: O = Omnivore V = Vegetarian GF = Gluten Free SC = See Comments

T-Shirt: Enter YS, YM, YL, YXL, AS, AM, AL, 1XL, 2XL, 3XL, 4XL

Roster Name Information:

	First/Nick Name	Last Name	Age	Grade	Birthday	Gender	T-Shirt	Food Preference
Cub						O M O F		O:O O:V O:GF O:SC
Mom				n/a		F		O:O O:V O:GF O:SC
Dad				n/a		M		O:O O:V O:GF O:SC

	Address	Cellphone	Cell Company	Landline	Work/Ext	Email Address
Mom						
Dad						

Sibling Name Information:

	First/Nick Name	Last Name	Age	Grade	Birthday	Gender	T-Shirt	Food Preference
1)						O M O F		O:O O:V O:GF O:SC
2)						O M O F		O:O O:V O:GF O:SC
3)						O M O F		O:O O:V O:GF O:SC
4)						O M O F		O:O O:V O:GF O:SC

Cub's Doctor: Cubs Doctor Phone:

Mom's Info: Employer: Occupation:

Hobbies:

Volunteer Interest Level:

First Aid Cert Agency: Date: 2yr 3yr I am an MD:

CPR Cert Agency: Date: 2yr 3yr

Prior Scouting:

Dad's Info: Employer: Occupation:

Hobbies:

Volunteer Interest Level:

First Aid Cert Agency: Date: 2yr 3yr I am an MD:

CPR Cert Agency: Date: 2yr 3yr

Prior Scouting:

Comments:

