

# Camp Card Program- Unit Card Checkout Form

Golden Spread Council

Complete and return this form now: PLEASE Print.

## COUNT YOUR CARDS !!!

Before you leave your Camp Card Kickoff meeting, verify the number of Cards in your packet, record the total, and sign below.

District: \_\_\_\_\_ Date: \_\_\_\_\_

Unit: Pack # \_\_\_\_\_ Troop # \_\_\_\_\_ Crew # \_\_\_\_\_ Post # \_\_\_\_\_

Our Card Sales Manager is:

Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ / (\_\_\_\_) \_\_\_\_\_  
(Day) (Night)

E-mail: \_\_\_\_\_

Total Cards issued (Card #\_\_\_\_/\_\_\_\_ Card #\_\_\_\_/\_\_\_\_) Total Cards \_\_\_\_\_

Total value of Cards received (# of cards received X \$5.00) \$ \_\_\_\_\_

Signature of Scouter receiving Cards:

\_\_\_\_\_

Please Print Name \_\_\_\_\_

\*\*\*\*\*

Unit # \_\_\_\_\_  COUNT YOUR CARDS!!!

*Remember - **Cards are just like money.** Each card you receive represents \$5.00 and must be accounted for at the end of the selling period or at your final turn in, by April 30, 2024* **NO LOST CARDS.**

Total Cards issued \_\_\_\_\_ Cards

Total value of Cards received (# of cards received X \$5.00) \$ \_\_\_\_\_



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