## Camp Card Program – Parent Checkout Form Golden Spread Council

Before you leave your Camp Card Kickoff meeting, verify the number of

Complete and return this form now: PLEASE Print.

## **COUNT YOUR CARDS!!!**

Cards in your packet, record the total, and	sign below.			
District:	Date:			
Unit: Pack # Troop #	Crew# Post #			
Parent Information Below:				
Parent Name:				
Phone: ()(Day)	_/ ()(Night)			
E-mail:	·····			
Total Cards issued (Card #/Car				
Total value of Cards received (# of cards received X \$5.00) \$				
Signature of Parent receiving Cards:				
Please Print Name				
***********	*******			
Unit #	COUNT YOUR CARDS!!!			
Remember - Cards are just like money. \$5.00 and must be accounted for at the enturn in, by NO	nd of the selling period or at your final			
Total Cards issued	Cards			
Total value of Cards received (# of cards received X \$5.00) \$				
Our Unit Card Card Coordinator is: Contact Info:	117.1917			

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## **COUNT YOUR CARDS!!!**

	our Camp Card Kic et, record the total,		the number of	
District:		Date:		
Unit: Pack #	Troop #	Crew #	Post #	
Parent Information	ı Below:			
Parent Name:				
Phone: ()_	(Day)	/ ()	(Night)	
E-mail:				
	ds received (# of car		_) Total Cards 00) \$	
Please Print Name	 			
	_		********	
Unit #	_	COUNT Y	OUR CARDS!!!	
\$5.00 and must be		e end of the selling	n receive represents g period or at your final RDS.	
Total Cards issued			Cards	
Total value of Card	ds received (# of car	rds received X \$5.0	00) \$	
Our Unit Card Car Contact Info:	d Coordinator is:		21/2	