



Troops and Pack 2050 Talent Release Form

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PLEASE PRINT CLEARLY

Scout/Participant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Guardian Telephone Number: _____

Troop Pack Today's Date: _____

Signature of Participant: _____

Parent/Guardian Name (if participant is under 18): _____

Signature of Guardian: _____

Electronic Signature (in lieu of) – In the absence of the ability to submit your signature or image of your signature, you may choose to electronically endorse this document by entering your initials (as the participant or legal guardian for those under the age of 18) in the space below:

