

Troop 96 Makajawan Planning - Information Form - 2017

Printed: 1/19/2017

Date Received:

| | | | |
|-------|-------|------|-------|
| | | Name | |
| Scout | Adult | Last | First |
| | | | |

Makajawan Week "3"

| Troop 96 Week "1" | | | | | | |
|-------------------|-----------|-----------|-----------|-----------|-----------|-----------|
| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
| 7/9/2017 | 7/10/2017 | 7/11/2017 | 7/12/2017 | 7/13/2017 | 7/14/2017 | 7/15/2017 |
| | | | | | | |

| OA | |
|----------|-------------|
| Observer | Brotherhood |
| | |

| | | | |
|-------------|--------|----------|-------|
| Provisional | No Fee | Late Fee | Notes |
| | | | |
| | | | |

Date Entered:

| Scout Account | |
|----------------------------|----------------|
| Amount Available (Balance) | Amount Applied |
| | |

Makajawan Week "4"

| Troop 96 Week "2" | | | | | | |
|-------------------|-----------|-----------|-----------|-----------|-----------|-----------|
| 7/16/2017 | 7/17/2017 | 7/18/2017 | 7/19/2017 | 7/20/2017 | 7/21/2017 | 7/22/2017 |
| | | | | | | |

| |
|---|
| If Provisional What week(s) are being planned |
| |

Available to pull trailer:

| | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Up on 7/9/2017 |
| <input type="checkbox"/> | Back on 7/22/2017 |

Tentative Planned Quantity

| Youth Size | | | |
|------------|--------|-------|---------|
| Small | Medium | Large | X Large |
| | | | |

Tentative Planned Quantity

| Adult Size | | | |
|------------|--------|-------|---------|
| Small | Medium | Large | X Large |
| | | | |

| | |
|---------------------------------------|--|
| Crossover Scout - No late fee applies | |
|---------------------------------------|--|

Available to Drive Up:

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Comment (total # avail): |

Available to Drive Back:

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Comment (total # avail): |

Approval Signature to move monies from Scout Account

Food / Health Needs:

| | |
|--------------------------|-----------------|
| <input type="checkbox"/> | Vegetarian |
| <input type="checkbox"/> | Vegan |
| <input type="checkbox"/> | Dairy Free |
| <input type="checkbox"/> | Gluten Free |
| <input type="checkbox"/> | Soy Free |
| <input type="checkbox"/> | Nut Free |
| <input type="checkbox"/> | Kosher |
| <input type="checkbox"/> | Allergy 1 _____ |
| <input type="checkbox"/> | Allergy 2 _____ |
| <input type="checkbox"/> | Other |

Advancement Planning
