



**KISHKAKON TRIBE, ORDER OF THE ARROW
LEWIS AND CLARK COUNCIL # 114**

1055 Harrison Avenue, Wood River, Illinois 62095 (618) 259-2145 Fax (618) 259-2165

SPRING FELLOWSHIP REGISTRATION FORM

(Please Print Clearly)

Full Name: _____ Nick Name: _____
(Please complete one form per person)

Street: _____ Date of Birth: ____ / ____ / ____

City, St, Zip: _____ Troop Number: _____

Telephone: _____ (Cell) _____ (W) _____

E-Mail: _____

Circle Two (2) Appropriate Categories: Youth (Under 21) Adult (Over 20) Male Female

_____ Yes, I plan to attend the Spring Fellowship on May 15th -17th
in Potosi, Mo.

_____ I have included my \$20.00 registration fee. \$ _____
(This does not include my dues)

_____ I would like to do my Brotherhood. I have included an \$ _____
additional \$15.00 for this fee.

_____ I have enclosed my 2009 dues of \$8.00 \$ _____

_____ I will not be able to attend however I am paying my \$ _____
2009 dues of \$8.00

Total Pd \$ _____

Make checks payable to **Lewis & Clark Council**

Mail or deliver to: Kishkakon Lodge after April 3: Kishkakon Lodge
Trails West Council Lewis & Clark Council
1055 Harrison Avenue 335 West Main St.
Wood River, Illinois 62095 Belleville, IL 62220

We require your reservation to be in the office **on or before Friday, May 1, 2009.**

Any questions call Lucas Geisler, 618-931-6841 or Toby Griffen, 618-692-0343

Please list any medical conditions that might limit you during this activity.

Please bring a copy of your camp medical forms. **Do not bring the original.** Reclaim your form at the end of the event. Unclaimed health forms will be destroyed after each event.