

First Name

Camp Cachalot Alumni Association

c/o Narragansett Council, BSA P.O. Box 14777 East Providence, RI 02914

New Member Information Form

Last Name

Street Address		Apt No.
City	State	Zip Code
Home Telephone	Birthdate (M/D/Y)	<u>.</u>
Email Address	May we contact you using this email address?	
	☐ Yes	☐ No
What was your first year attending Camp Cachalot, if any?		
Did you attend any of the other camps used by Moby Dick, Cachalot, or Massasoit Councils or their predecessors? (Camp Noquochoke, Camp Maxim, Camp Stafford, Rock O'Dundee, etc.) If so, when?		
Did you ever serve as Camp or Council staff? If so, in what years and in what capacity?		
Membership and Payment Options		
All memberships (except lifetime) are valid for the membership year in w Alumni Association newsletter published during that time frame. Our mem		
paying by check, it should be payable to "Narragansett Council, BSA" with a memo of "Camp Cachalot Alumni Association". Mail your completed application to the address above.		
man your completed approach to the	address above.	
Membership Type (check one) 1 Year 2 Years	3 Years	Amount
Youth Membership (under 21)	□ \$25 □ \$25	
Senior Membership (over 65)	\$25 \$65	
Lifetime Membership		•
_		\$
I would like to make an additional donation in this amount		\$
Total		\$
Payment Method (check one):	MasterCard	□ V/SA
Credit Card Number CC Se	curity Code	Credit Card Expiration Date
Cardholder Name as it appears on the card		
Credit Card Billing Address, if different from above		
Cardholder Signature		Date

 $[\]cdot Your \ credit \ card \ security \ code \ is \ a \ 3-digit \ number \ on \ the \ back \ of \ your \ credit \ card \ on \ the \ right \ of \ the \ signature \ strip.$