

**REGISTRATION FORM: Horseshoe Scout Reservation Alumni Association - send to:
Att: HSRAA % Chester County Council, BSA, 504 S. Concord Rd., West Chester, PA 19382**

Name: _____ Email Add: _____

Street Address: _____

City, State, ZIP code: _____ Telephone (Home) _____

Occupation: _____ Telephone (Bus.) _____

Year of Birth: 19_____

I have camped at (please check): ___ Camp Horseshoe; ___ Camp John H. Ware, III (Jubilee); ___ Both.

Camper Year(s) Date(s): _____

Camp Staff Year(s) Date(s): _____ Position: _____

_____ Please send me further information about The Horseshoe Scout Reservation Alumni Association.

The following Camp Horseshoe/Camp Ware alumni* may be interested in the HSRAA:

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

* We especially need names/addresses of people not currently registered with Council or Lodge 22 OA.