

POW WOW 2023 EVENT REGISTRATION

Church Name:			Phone Number:				
	Address:						
City:		State:	State:		Zip Code:		
Pastor'	s Name:						
Outpos	t Coordinator's Name:						
	Emergency Contact and Pho						
Outpos	t:Division:		Section:				
Admin Use Only	Name		Boy	Leader	Visitor	Amt. Paid	
ese emy							
	Totals						