



I hereby express my desire to participate in the character development, citizenship training, and personal fitness program of the Boy Scouts of America and subscribe to the Blue Mountain Council, BSA in the amount indicated.

BLUE MOUNTAIN COUNCIL 2010 FRIENDS OF SCOUTING CAMPAIGN

Signature _____ Date _____

Enrolled by: _____

S10 Unit # _____

Name _____

Address: _____

City State Zip: _____

Phone _____

Email _____

Total Pledged \$ _____

Total Paid Now \$ _____

Balance Due \$ _____

Cash Check
 Visa MC AMEX Disc

Billing Information

Bill me once (_____)
 Bill me twice (Now and _____)
 Bill me monthly now to December
 Continuous (until I tell you to stop)

Please make checks payable to: Blue Mountain Council, 8478 W. Gage Boulevard, Kennewick, WA 99336

Please contact me about the tax benefits of property and legacy gifts

Card # _____ Exp. Date _____
Verification Code ___ (back of card)

Is Certified as a
FRIEND OF
SCOUTING
of the

BLUE MOUNTAIN COUNCIL

Pledge \$ _____

Payment Now \$ _____

Date: _____

Enrolled by: _____

Thank you for your support!

www.bmcbsa.org



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