Cub Haunted Staff Application October 23-25, 2020 Camp Horne

PERSONAL INFORMATION

(Please print NEATLY in ink or type): NAME. Middle Name First Name Last Name Home phone: (_____) Best time to call: ______
Cell Phone: (_____) ____ Gender: Male or Female (circle one) **BACKGROUND INFORMATION SCOUTING**: Currently registered in: Troop/Team/Crew#_____ Council/District: Years of tenure - As a youth_____ As an adult_____ Highest rank achieved: _____ Current Leadership Position:_____ Do you feel comfortable leading and teaching younger scouts? Why? Are there any skills you possess that you could contribute to making Cub Haunted a success?