



BOY SCOUTS OF AMERICA®
CENTRAL MINNESOTA COUNCIL

ALPHA LUPUS STAFF APPLICATION

Name _____ Troop/Crew# _____ Age _____ Rank _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Position in Scouting _____

Camping
Experience _____

EMAIL _____

You must be registered thru the BSA to participate in any event!

Send application to:

Winter Camp Staff
Central Minnesota Council
1191 Scout Drive
Sartell, MN 56377

As staff it is important that you bring your current health form to camp with you