

TFL Scout Expo '09

5th Swaziland Scout International Camp

July 31 - August 11, 2009

Reply Slip (Form B)

Country: _____

Name of NSO: _____

Name: _____

Nationality: _____ Gender: _____

Date of Birth: _____

Day/Month/Year

Position in Scouting: _____

Scout Venture Rover Scout leader

E-mail: _____ Tel: _____

Dietary Requirements, if any: _____

T-shirt Size: _____ Height: _____ cm

Contact in case of emergency:

Name: _____ TEL: _____

E-mail: _____

Parents/Guardian Signature (consent): _____

Date: _____

Signature & Position of Authorised Official

To be returned NOT LATER THAN **March 31, 2009**

TFL Scout Expo '09, Swaziland Scout Association

TFL Centre, P. O. Box 6112, MBABANE, H100, Kingdom of Swaziland

Tel: +268 604 4037, Fax: +268 404 9333, E-mail: bheki@swazi.net