

Talent Release Form for Troop 716

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PLEASE PRINT CLEARLY

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Troop #: _____ Troop City: _____

Signed: _____

Guardian: _____
(if under the age of 18)

Witness: _____

Session Date: _____