

Casegha-USA

Association des Anciens Scouts & Guides d'Haiti
P.O. Box 70 Cambria Heights Station. NY 11411

Membership Application

I agree with the aims of the Association and would like to be registered as a member with the approval of Casegha-USA' Board of Directors.

Last Name: _____ First Name: _____

Address: _____ Phone: () _____

City : _____ Zip Code : _____

Email address: _____

I was not a Scout/Guide. - I was a Scout/Guide

Troup / Group Name: _____

Town / City: _____ Country: _____

Date of Promise: ___ / ___ / _____

Referred by: _____ and _____

Both references must be duly registered Casegha-USA members if you were not a Scout/Guide;
one reference if you were a Scout/Guide

Annual dues: \$50

(Fees include Casegha-USA membership and the International Fellowship membership - ISGF).

Note: Please, make all checks or money orders payable to:

Casegha-USA
P.O. Box 70
Cambria Heights Station
NY 11411

Candidate Signature

Today's Date: ___ / ___ / _____

FOR OFFICE USE ONLY

Approved by Board of Directors' Vote: _____

Date: ___ / ___ / _____ No.: _____

President of the Board

General Secretary