| omi Scout Membership Form   |                |                 |
|---|----------------|-----------------|
| Title: Mr. Mrs  | . Ms. Miss     |                 |
| Last Name:  | First Name:    | Middle Initial: |
| Member Name:(The name that will be associ   | Email Address: |                 |
| Address (if applying for Golden omi Scouts)   |                |                 |
|   |                |                 |
| I hereby certify that the information provided on this application is accurate and complete. I understand that omi Scouts is just for fun and that any actions I commit are solely my own responsibility. |                |                 |
| Signature of Applicant:   |                | Date:           |
| For Office Use Only (Do not write below this point)   |                |                 |
| SARAH   | OMI            | DAVID           |