



# OA Troop Representative

## Registration Form

A copy of this form must be filled out and filed with the lodge to be considered an actual OA Troop Representative.

Date: \_\_\_\_\_ Term of Office: \_\_\_\_\_

Name: \_\_\_\_\_ Troop # \_\_\_\_\_

Address: \_\_\_\_\_ District: \_\_\_\_\_

\_\_\_\_\_ OA Chapter: \_\_\_\_\_

\_\_\_\_\_ O/B/V: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Scouting Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OA Experience: \_\_\_\_\_

\_\_\_\_\_

Name of Advisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_ E-Mail: \_\_\_\_\_

\_\_\_\_\_ O/B/V: \_\_\_\_\_

Scoutmaster: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_ E-Mail: \_\_\_\_\_

\_\_\_\_\_ O/B/V: \_\_\_\_\_

I understand the responsibilities set forth in the OA Troop Representative Job description and will do my best to exemplify the traditions of the Order of the Arrow, Wimachtendienk, Wingolauchsik, Witahemui.

\_\_\_\_\_  
OA Troop Representative

\_\_\_\_\_  
Advisor

\_\_\_\_\_  
Scoutmaster

Please send Completed forms to:  
Troop Relations Vice-Chief  
Nendawen Lodge 618  
1340 Juliana St.  
Parkersburg WV, 26101