



# JACCOS TOWNE LODGE DUES FORM



Please turn in Dues Form with payment at a Lodge or Chapter meeting, event, or  
by mail to: Crossroads of America Council, Attn: OA Staff Advisor, 7125 Fall Creek Road North, Indianapolis, IN 46256

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Unit Type & No. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phones: Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Induction dates: Ordeal: \_\_\_\_\_ Brotherhood: \_\_\_\_\_ Vigil Honor: \_\_\_\_\_

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

\_\_\_\_\_ \$10.00 Dues for year 2016

\_\_\_\_\_ \$15.00 Dues for year 2017

(Use Cam code 6OAD)

Membership #: \_\_\_\_\_

(on BSA membership card)

East Section		West Section	
District	Chapter	District	Chapter
Golden Eagle	Wahpekahmekunk	Del-Mi	Quanasita
Iron Horse	Seke Macque	Hou Koda	Wundchenneu
Northeast	Wapsuchuppecatt	North Star	Lowaneu Allanque
Old Trail	Macquissin	Sugar Creek	Tatankaskah
Pathfinder	Lobarlewhense	T-Sun-Ga-Ni	Wapsuchuppecatt
Pioneer	Wapsuchuppecatt	Wabash Valley	Kickapoo
Sakima	Kikthawenund		

Check appropriate line for your District/Chapter

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_ Receipt No. \_\_\_\_\_