

Appendix 2 – Contingent Registration Form

Please send the filled form back to: info@ej2020.org

National Scout Organization/ Member Organization

Country

How many people do you estimate your national contingent would consist of?

	Male	Female	Total
Participant Scouts/ Guides	<input type="text"/>	<input type="text"/>	<input type="text"/>
Unit Leaders	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contingent Management Team	<input type="text"/>	<input type="text"/>	<input type="text"/>
International Service Team	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Contingent Size	<input type="text"/>	<input type="text"/>	<input type="text"/>

Form is to be completed by the Head of Contingent of the NSO/MO. Details about the HoC filling out this form are to be mentioned below.

First Name

Family Name

Position in NSO/MO

Email

Telephone

Street

Region/State

Postcode

City

Approval from NSO/MO

First Name

Family Name

Position in NSO/MO

Email

Telephone

Street

Region/State

Postcode

City

Signature

Date
