

Buffalo Mountain Lodge

New Member Transfer Form

First Name:

Middle Initial:

Last Name:

Nickname:

Date of Birth:

BSA ID Number (On membership Card):

Unit and Number:

Mailing Address:

City:

State:

ZipCode:

Home Phone:

Work Phone:

Mobile Phone:

Email:

Date of Ordeal:

Council of Ordeal:

Date of Brotherhood:

Council of Brotherhood:

Date of Vigil:

Council of Vigil:

Vigil Name:

Vigil Name Translation:

Adults Please Complete the Following:

Occupation:

Employer:

Craft / Trade Skills: Plumbing, Carpentry, EMT