

CONFIRMED GUEST LIST
Million Dollar Day for Scouting

Table Host's Name: _____ MDD Event: St. Paul Fort Snelling

Phone: _____ Fax: _____ Email: _____

Please give complete information for each guest you have confirmed to attend the Million Dollar Day for Scouting.

Guests 1-4

Confirmed Million Dollar Day for Scouting Guests		
#	Individual and/or Company Name/Title Mailing Address	Phone Numbers/Email
1.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
2.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
3.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
4.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		

Please fax, mail or email to:

DEVELOPMENT DEPARTMENT
 Northern Star Council, BSA
 393 Marshall Avenue
 Saint Paul MN 55102-1717

FAX: 763-231-7202
 tswenson@nsbsa.org

MILLION DOLLAR DAY FOR SCOUTING GUEST LIST

Guests 4-9

Million Dollar Day for Scouting Guests		
#	Individual and/or Company Name/Title Mailing Address	Phone Numbers/Email
5.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
6.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
7.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
8.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
For Development Office Use Only:		
9.	Name:	Bus:
	Company:	Home:
	Title:	Fax:
	Street:	E-mail:
	City/State/Zip code:	
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