



Frontiersmen Camping Fellowship

Henry Rowe Schoolcraft Chapter



FCF MEMBER

UPDATE SHEET

PERSONAL INFORMATION

NAME _____ FCF NAME _____

ADDRESS _____ CITY _____

STATE MI ZIP _____ PHONE () _____

DATE OF BIRTH (Month _____) (Day _____) (Year _____) _____ YOUNG BUCK _____ O

HOME CHURCH _____ OUTPOST # _____

CHURCH ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE () _____

POSITION HELD IN OUTPOST: _____

LIST FCF STAFF POSITIONS HELD IN SECTION, DISTRICT, TERRITORY, NATIONAL, ETC

CHECK AND/OR COMPLETE ALL INFORMATION BELOW THAT APPLIES TO YOU

____ Lifetime Membership (Mich.) Date _____

____ Dues paid through (Year) _____

____ Dues outstanding (Year/s) _____

____ Membership Active Date _____

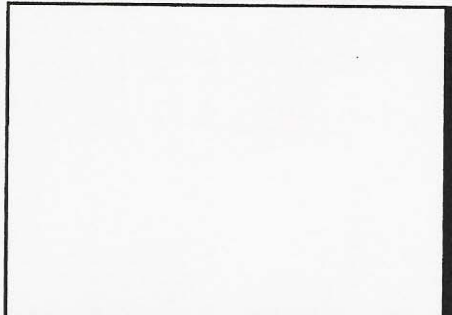
____ Membership Inactive Date _____

____ Membership Dropped Date _____

____ Membership Transfer to/from* Date _____

*Chapter Name/State: _____ / _____

SKETCH PERSONAL TOTUM IN BOX BELOW:



____ Frontiersman Date _____

____ Buckskin Frontiersman Date _____

____ Wilderness Frontiersman Date _____

____ Company Trapper Date _____

____ Bourgeois Date _____

____ Free Trapper Date _____

____ Latest FT Number# _____ Date _____

____ Completed Black Powder Course Date _____

____ Completed Officers Tng. Course Date _____

LIST YOUR FCF TRADE(S):

LIST ANY FCF SKILLS YOU HAVE: