

UNIT ACCIDENT AND SICKNESS INSURANCE PLAN

Unit #		District	
	@	\$1.00 PER PERSON = \$	_____
# Cub Scouts			
	@	\$1.00 PER PERSON = \$	_____
# Leaders			
Total #		TOTAL AMOUNT \$	_____

**PLEASE INCLUDE A SEPARATE CHECK WITH YOUR RE-CHARTERING PAPERS.
THE CHECK SHOULD BE MADE PAYABLE TO
"GREATER PITTSBURGH COUNCIL, B.S.A."**