

**SCHOEPE SCOUT RESERVATION AT LOST VALLEY
MERIT BADGE PREREQUISITE VERIFICATION FORM**

Scout's Name: _____

Troop: _____ Council: _____

Scoutmaster's Name: _____

Scoutmaster's Phone: _____

Scoutmaster's Email: _____

Scoutmaster Signature: _____

**The above Scout has satisfied the following requirements
prior to arriving at camp.**

Merit Badge Name: _____

Requirements: _____

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