



Warriors Passage National Recreation Trail

Request for Patches

Scout Unit Other Group _____

Troop/Pack/Post # _____ Council _____

Leader _____

Address _____

City, State, Zip _____

Phone (____)____-____ Email _____@_____

Date your group hiked or backpacked the trail _____

How many completed the hike or backpack? _____

Did everyone complete all the patch requirements? Y N

How many patches are your ordering? _____ x \$5.00 = \$_____

We will mail these patches to the leader address unless you ask us to mail them to an alternative address, as follows:

Mail this form and your check to Warriors Passage, c/o Richard Harris, 533 Shaw Mtn Rd, Tellico Plains, TN 37385. Make the check out to the "Cherokee Hiking Club" and put in the memo area "Warriors Passage Patches"