

Unit Join Night Planning Form

Unit Information

Cub Scout Pack
Scouts BSA Troop

Unit Number(s):
District:

Event Organizer

Name _____ Phone _____
Email _____

Timing

School Start Date _____ 1st Unit Meeting Date _____
1st Youth Talk Date _____ Joint Night Date _____
2nd Youth Talk Date _____ Onboarding Date _____

Promotional Plan (check which you want to use & details)

Postcards _____	Newspaper _____
Flyers _____	Social Media _____
Radio _____	Posters _____
Billboards _____	Newsletters _____

Flyers

School Flyer # 1 Date _____ # of Flyers _____
School Flyer # 2 Date _____ # of Flyers _____
School(s) to Deliver to _____
Grade levels for flyers _____

Additional Materials Needed (Check the boxes and indicate the required amount.)

_____ Posters	_____ Youth Applications (English)
_____ Roll Up Posters (limit 2)	_____ Adult Applications (English)
_____ A-Frame Signs (limit 2)	_____ Youth Applications (Español)
_____ Yard Signs	_____ Adult Applications (Español)
_____ Banners	_____ Onboarding packet envelopes

Join Night Details

Event Location _____
Time of Event _____

Join Night volunteers (insert names)

Sign In Table _____	Join Night Host _____
Activity Leader _____	Join Night Host _____
Activity Leader _____	Cashier _____
Application Review _____	Application Review _____

Onboarding Night volunteers

Name	Onboarding Duty	Name	Onboarding Duty
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Unit Leader Check _____ District Exec Check _____