



BTLF YOUTH GROUP

NAME: _____

ADDRESS: _____

EMAIL ID: _____

CONTACT# _____

SCHOOL / COLLEGE ATTENDING: _____

YEAR in SCHOOL / COLLEGE: _____

INTERESTS / HOBBIES: _____

**I would like to join the BTLF Youth Group
because** _____



Email the completed form to btfonline@gmail.com or mail out to BTL Foundation, 114 Mettenet Court, Hockessin DE 19707