

## SCOUTING ANNIVERSARY MONTH

### UNIT RECOGNITION APPLICATION

PACK – TROOP – TEAM – CREW – POST (*circle one*)      NUMBER \_\_\_\_\_

DISTRICT \_\_\_\_\_

SPONSORING INSTITUTION

\_\_\_\_\_

UNIT LEADER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NUMBER ( \_\_\_\_\_ ) \_\_\_\_\_

EXHIBIT / DISPLAY or EVENT (*circle one*)

LOCATION OF EXHIBIT/DISPLAY **or** EVENT

\_\_\_\_\_

DESCRIPTION OF EXHIBIT/DISPLAY **or** EVENT

\_\_\_\_\_

#### MAIL TO

Activities Service  
Greater St. Louis Area Council, B.S.A.  
4568 West Pine Boulevard  
St. Louis, MO 63108-2179