Girl Scouts of Southern Alabama, Inc.

Girl Scouts® End of Year Certificate

Please complete and return this form to your membership staff at least four weeks prior to your event or by the last Friday in March. The staff member will forward this form to the service center to be processed.

Service Unit Manager _____ Service Unit # _____

Membership Staff _____ Date of Event _____

Please print clearly or type (use back or separate sheet if needed).

Individual's Name	Troop #	Position	Type of Certificate

Types of Certificates Available

1st Year Certificate	All first-year leaders, co-leaders, and assistant leaders
Thank-You Certificate	Leaders, co-leaders, assistant leaders
Flying High Certificate	Volunteer leaders, co-leaders, and/or assistant leaders returning for the third year
SUM Certificate	Please indicate if this is your 1st, 2nd, etc., year as SUM

Total Number of Each Certificate Needed

1ST Year Certificate	_____	5-Year Pins	_____
Thank-You Certificate	_____	10- Year Pins	_____
Flying High Certificate	_____		
SUM Certificate	_____	Number of years	_____

FOR OFFICE USE:

Date Received _____ Date Completed _____

Order Mailed to _____ Given to _____