Region 3 Religious Recognition Pin
Youth Application

Please complete and send to: Office of Youth & Young Adult Ministry
Attn: Scouting
47 Wiggan St.
New Philadelphia, PA 17959

Name:_____

Address:_____

_____

Phone: _____ Email: _____

Parish: _____

Please list/describe the following on a separate sheet of paper:

- Scouting Activity/Involvement
- Parish Activity/Involvement
- School Activity and or Offices Held
- Community Activity/Involvement
- Past Awards and Recognitions (Religious/Secular)
- What impact have the Girl Scout Religious Recognition programs made in your life?

I have completed the Spirit Alive program and the following National Girl Scout Religious Recognition programs: 1) _____ 2) _____

_____ _____
Applicant's Signature Date

I recognize the work that the applicant has completed and attest to the applicant's Christian character.

_____ _____
Girl Scout Advisor Date

_____ _____
Pastor's Signature Date

OFFICE USE
Date Received_____ Date Mailed_____