

**Wahunsenakah Lodge
Honor Member Recognition Program**



The Lodge has established an **Honor Member** recognition program in order to acknowledge those members who have endeavored to live up to their commitment to the Brotherhood. The recognition is in the form of a special edition pin.

The requirements must be satisfied between December 1 and November 30. To qualify, the completed form must be received at the Scout Service Center at P.O. Box 12144, Newport News, VA 23612 no later than November 30.

Name: _____ O B V Youth _____ Adult _____

Unit: _____ Chapter: _____

All of the five categories (A-E) must be completed.

Check all applicable

A. Register and attend a minimum of **three Lodge events.**

- | | |
|---|---|
| <input type="checkbox"/> Holiday Banquet | <input type="checkbox"/> Summer Service Weekend |
| <input type="checkbox"/> Winter Service Weekend | <input type="checkbox"/> Fall Fellowship |
| <input type="checkbox"/> Spring Service Weekend | |

B.

If eligible, earn Brotherhood Date: _____

If not eligible:

Help a Brother earn Brotherhood Their Name: _____

OR

Serve as a Nimat or Nimat Adviser Event Date: _____

C. Serve on a Lodge or Chapter Committee Committee Name: _____

D. Accomplish a minimum of **five of the following:**

- | | |
|---|-----------------|
| <input type="checkbox"/> Have a unit election team visit your unit | Date: _____ |
| <input type="checkbox"/> Promote camping by a unit visitation | Date: _____ |
| <input type="checkbox"/> Participate in Chapter or Lodge elections | Date: _____ |
| <input type="checkbox"/> Attend a Chapter event | Date: _____ |
| <input type="checkbox"/> Attend a Chapter business meeting | Date: _____ |
| <input type="checkbox"/> Attend Lodge Leader Development Conference | Date: _____ |
| <input type="checkbox"/> Chair or Adviser of a Lodge or Chapter committee | Name: _____ |
| <input type="checkbox"/> Lodge or Chapter officer/adviser | Position: _____ |
| <input type="checkbox"/> Attend Section SR-7A Conclave | Date: _____ |
| <input type="checkbox"/> Attend NLS or NLATS | Date: _____ |
| <input type="checkbox"/> 10 days and nights of Scout camping during this year | Date: _____ |
| <input type="checkbox"/> Work on summer camp staff | |

Camp Name: _____

E. Annual dues paid on time (on or before November 30) Date: _____