



# Request for Membership Numeral Pin (5, 10, 15 years)



20 Washington Avenue, North Haven, CT 06492  
(800) 922-2770 (in CT) • 203-239-2922 • 203-239-7220 (Fax) • [www.gsofct.org](http://www.gsofct.org)

The Membership Numeral Pin recognizes the total years of registered membership in Girl Scouts at **five-year intervals**. Years as a girl member plus years as an adult member are combined and counted toward this recognition. This request is for membership years totaling 5, 10 or 15 years.\* The 5, 10 or 15-year Membership Numeral Pin is provided by the local Service Unit.

### Form of Recognition:

- Award is a membership numeral pin attached to a gold chain.
- 5, 10 and 15 year pins are presented at the local Service Unit level.

### Criteria:

- Candidate must be a registered adult member of Girl Scouts.
- Total membership years must be less than 20.
- Candidate must have completed the years for which she/he is applying (e.g. the soonest you may apply for the 5-year pin is October 1<sup>st</sup> of your 6<sup>th</sup> year.)

### Nomination:

- This request is completed by the candidate (self-nomination) or another adult member of Girl Scouts.

### Submission:

- Please submit this completed request form **by April 1, 2012** to your local Service Unit Recognitions Chairperson or designee, who will retain this copy for their records.

### Award Purchase:

- The local Service Unit Recognitions Chairperson or designee presents a copy of the completed Service Unit Recognition Committee Report form to their local Girl Scout council retail shop for pin purchase.

**Deadline:** *The local Service Unit Recognitions Chairperson or designee must receive this request form no later than April 1, 2012. Forms received after this date will be awarded the following membership year.*

*Thank you and congratulations!*

\_\_\_\_\_  
Candidate Name: \_\_\_\_\_ Application Date: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Service Unit: \_\_\_\_\_ Staff Member: \_\_\_\_Yes \_\_\_\_ No  
Service Unit Recognitions Chairperson or Designee: \_\_\_\_\_  
Please check one: \_\_\_\_\_5-year numeral pin \_\_\_\_\_10-year numeral pin \_\_\_\_\_15-year numeral pin

**Questions:** *Please contact the Volunteer Services Department at [adultdev@gsofct.org](mailto:adultdev@gsofct.org) or 203-239-2922 ext 3347.*

Service Unit Use Only: Service Unit Designee Signature: _____ Date Received: _____
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*\*For the 20-years and above Membership Numeral Pin, please use the Request for Membership Numeral Pin (20 years and above) form.*

ADULT RECOGNITIONS