



Sakima Lodge #573

Serving LaSalle Council #165 since 1972

Brotherhood Honor Application

YOUR INFORMATION

Name: _____

Address: _____

City, ST, ZIP: _____

Phone: (____) _____

Birthdate (mm/dd/yyyy): ____/____/____

Troop Number: _____

Ordeal Date (mm/dd/yyyy): ____/____/____

If you can't remember the date, ask your Brotherhood Nimat.

Brotherhood event (circle one):

- | | | |
|-----------|-----------|------|
| Spring | Summer | Fall |
| Camp Wk 1 | Camp Wk 2 | |
| Camp Wk 3 | Camp Wk 4 | |
| | Camp Wk 5 | |

TO BE FILLED OUT BY THE

BROTHERHOOD NIMAT

Nimat Name: _____

All items below to be completed prior to the Brotherhood Honor Ceremony:

____ Current Year Dues Paid are paid

____ \$25 Payment (circle one): CASH CHECK
Checks are payable to LaSalle Council, BSA

____ Issued Receipt #: _____

____ Completed Brotherhood Letter (Written on the back side of this form)

____ Completed Brotherhood Tasks

____ Money, Letter and this Form given to the Lodge Adviser

