omi Scouts Badge Application Form
Name of Badge:
Badge Number: New application: Reapplication: Applicationof
Personal Information (please print)
Title: Mr. Mrs. Ms. Miss
Last Name:First Name:Middle Initial:
Membership Number:
Email Address: New Member? Yes No
Proof of Achievement
Attached: Photo Witness Testimony Additional Description Pages Other Number of Additional Documents Attached Witness Name: Witness Membership Number: Witness Membership Number: Yes I want my accomplishment to be recognized on the omi Scouts Wall of Awesome: Yes My application details and evidence may Yes No Description of Achievement: No No No Description of Achievement: No No No Image: No No No No Image: No No No No Description of Achievement: No No No Image: No No No No No Image: No Image: No Image: No Image: No Image: No Image: No Image: No
false statements may cause my application to be rejected and, in gross violations, my membership to omi Scouts to be revoked. I understand that omi Scouts is just for fun and that any actions I commit are solely my own responsibility.
Signature of Applicant:Date:Date:
For Office Use Only (Do not write below this point)
SARAH OMI DAVID