

Tschipey Achtu Lodge ORDER OF THE ARROW YOUTH MEMBERSHIP UNIT ELECTION REPORT



PLEASE TYPE OR PRINT CLEARLY / ALL INFORMATION MUST BE FILLED IN FOR PROCESSING*

*Illegible or incomplete forms will be returned.

Unit _____ District _____ ELECTION DATE _____

SM Name _____ E-mail address _____

OA Troop Rep _____ E-mail address _____

Election information:	x _____	Tele no. _____
____ Number of active registered Scouts	Signature of Unit Leader (required)	
____ Number of Scouts present for elections		
____ Number of Scouts eligible	x _____	Tele no. _____
____ Number of ballots	Signature of Troop Rep	

Youth Members Elected:

▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

Date of Birth _____ Telephone no. _____ E-mail _____

▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

Date of Birth _____ Telephone no. _____ E-mail _____

▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

Date of Birth _____ Telephone no. _____ E-mail _____

▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

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▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

Date of Birth _____ Telephone no. _____ E-mail _____

▶ Last Name _____ First Name _____ Rank _____

Address _____ City / State / Zip _____

Date of Birth _____ Telephone no. _____ E-mail _____

Return this form to the Scout Servicenter. Make a copy for the Troop's records. Remember, this form *does not* register candidates for any Ordeal induction event. A registration form will be mailed to each nominee prior to the next Fellowship.