HONOUR APPLICATION FORM

CLUB: _____ DATE: _____

HONOUR: _____ INSTRUCTOR: _____

QUALIFICATION: _____

DELIVERY ADDRESS:

_____

Do you (the Instructor) have this honour? ☐ NO ☐ YES

PLEASE NOTE: The minimum age of the applicant is 10 years – Friend Pathfinder Class

NAME	AGE	DATE COMMENCED	DATE COMPLETED

TOTAL NUMBER OF APPLICANTS:_____

Have the applicants completed all sections of this honour with satisfactory attention to all physical or outdoor requirements? ☐ YES ☐ NO

ABC SECRETARYS SIGNATURE: _____ ABC ORDER NO: _____

OR

CHEQUE ENCLOSED FOR TOTAL COST $_____

SIGNATURE OF INSTRUCTOR: _____

PATHFINDER OR AY LEADER: _____

SIGNATURE OF DISTRICT DIRECTOR:_____

ALL WORKBOOKS MUST BE SIGHTED AND CHECKED BY YOUR DISTRICT DIRECTOR