

Robert Rutherford Service Award Nomination Form

Name: _____

Chapter: _____ Age: _____

Full Address: _____

Registered as: _____ in: _____

Requirement Check List (All must be met):

_____ Dues Paid

_____ Brotherhood Member Date of Brotherhood: _____

_____ Member for two years Date of Ordeal: _____

Chapter Chief _____ Date: _____

Chapter Adviser _____ Date: _____

Nominations due by October Lodge Executive Committee Meeting.

Send to:

Order of the Arrow, BSA
Robert Rutherford Award
1776 West Warren
Detroit, Michigan 48209

In the space on the bottom, state in detail the reasons for nomination.
(Use additional paper as needed)