



Honor Member Recognition Program

The Lodge has established an **Honor Member** recognition program to acknowledge those members who have endeavored to live up to their commitment to the Brotherhood. The recognition is in the form of a special edition pin.

The requirements must be completed between December 1st and November 30th of each year. To qualify, the completed form must be hand delivered OR emailed to the Lodge Chief, Lodge Adviser, or 1st Vice Chief no later than November 30th.

Name: _____ Youth or Adult (Circle One)

Honor Level (Circle One): Ordeal Brotherhood Vigil

Unit: _____ Chapter: _____

All five categories (A-E) must be completed

A. Register and attend a minimum of **three Lodge Events**:

- | | |
|---|---|
| ☐ Annual Banquet | ☐ Summer Service Weekend |
| ☐ Winter Service Weekend | ☐ Fall Fellowship |
| ☐ Spring Service Weekend | |

B. ☐ If eligible, earn Brotherhood Date: _____

If not eligible:

☐ Help a Brother earn Brotherhood Brother's Name: _____

OR

☐ Serve as a Nimat or Nimat Adviser Event & Date: _____

C. Serve on a Lodge or Chapter Committee

Committee Name: _____

Committee Chair or Adviser Name & Signature: _____

D. Accomplish a minimum of **five** of the following:

- | | |
|---|------------------|
| ☐ Have a unit election team visit your unit | Date: _____ |
| ☐ Promote camping by a unit visitation | Date: _____ |
| ☐ Participate in two Chapter Elections | Dates: _____ |
| ☐ Attend a Chapter Event (Duck Day or Service Day) | Date: _____ |
| ☐ Attend 4 Chapter Meetings (Lodge Weekends do not count) | Dates: _____ |
| ☐ Attend Lodge Leadership Development (LLD) | Date: _____ |
| ☐ Chair or Adviser of a Lodge or Chapter Committee | Committee: _____ |
| ☐ Lodge or Chapter Officer / Adviser | Position: _____ |
| ☐ Attend Section E9 Conclave | Date: _____ |
| ☐ Attend SLS, NLS, DYLC or any Section, Region, or National Level Training | |
| Event Attended: _____ | Date: _____ |
| ☐ 10 nights of Scout camping during this year | |
| List Dates with number of nights: _____ | |

☐ Work on Summer Camp Staff Camp Name: _____

E. Annual dues paid on time (on or before November 30) Date: _____

Approved XX/XX/XXXX