



Girl Scouts of Kentucky's Wilderness Road Council

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www.gskentucky.org



**COMMUNITY RECOGNITIONS
Application**

Name of Service Unit Representative _____
Completing Form

Address _____

City / State / Zip _____

Phone _____

Name of business, organization or _____
church to receive recognition

Address _____

City / State / Zip _____

Phone _____

Please describe why you feel this company, church or civic organization deserves this
recognition: _____

To your knowledge, have they ever received Girl Scout recognition before? If yes, when?

No Yes _____

Which recognition? Plaque Certificate

Service Unit Manager Signature _____

Membership Specialist Signature _____

Date requested _____ Date presented _____