



Girlguiding Sheffield

AUTHORITY TO PURCHASE FROM S.G.S. (OUTDOORS)

MEMBER BROOCH & CERTIFICATE * / LONG SERVICE CERTIFICATE (NON-MEMBERS) *

* delete as appropriate

NAME _____

Reg No. _____

UNIT _____ DISTRICT _____

DIVISION _____

Award Due

Date award due

- 5 years service _____
- 10 years service _____
- 20 years service _____
- 30 years service _____
- 40 years service _____
- 50 years service _____

Please tick appropriate award

Commissioner - Signature _____ Date _____

For completion by County administrator

Award issued on _____

Signed _____