

# 2010 Good Turn Week

## Roster of Youth Participants

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Unit#: \_\_\_\_\_

Address: \_\_\_\_\_ District: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_ # of Service Hours: \_\_\_\_\_

Project Description: \_\_\_\_\_

### PATCHES FOR YOUTH ONLY!

**Scout Name**

**Scout Name**

1. \_\_\_\_\_

16. \_\_\_\_\_

2. \_\_\_\_\_

17. \_\_\_\_\_

3. \_\_\_\_\_

18. \_\_\_\_\_

4. \_\_\_\_\_

19. \_\_\_\_\_

5. \_\_\_\_\_

20. \_\_\_\_\_

6. \_\_\_\_\_

21. \_\_\_\_\_

7. \_\_\_\_\_

22. \_\_\_\_\_

8. \_\_\_\_\_

23. \_\_\_\_\_

9. \_\_\_\_\_

24. \_\_\_\_\_

10. \_\_\_\_\_

25. \_\_\_\_\_

11. \_\_\_\_\_

26. \_\_\_\_\_

12. \_\_\_\_\_

27. \_\_\_\_\_

13. \_\_\_\_\_

28. \_\_\_\_\_

14. \_\_\_\_\_

29. \_\_\_\_\_

15. \_\_\_\_\_

30. \_\_\_\_\_

You will be contacted when patches are delivered to the Boy Scout or Girl Scout Service Centers.