



Conseil du Québec Council
Réserve scoute Tamaracouta Scout Reserve



THE HONOURABLE SOCIETY OF THE KNIGHTS OF TAMARA

NOMINATION OF A SQUIRE

(Please Print)



Scout

Venturer

Scouter

NAME OF NOMINEE: _____

HOME ADDRESS: _____

_____ Postal Code: _____

HOME PHONE: (_____) _____

DATE OF BIRTH: _____ / _____ / _____
(DAY) (MONTH) (YEAR)

GROUP NAME: _____

AREA: _____

CAMPING PERIOD: _____

CONFIRMATION OF ELIGIBILITY:

We confirm that this candidate has fully met the eligibility requirements as described in the 2012 Tamaracouta Scout Reserve Leaders' Handbook.

Name

Signature

Nominator: _____

Second: _____

NB: All Nominations require two adult signatures (nominator and second), at least one of whom is already a Knight. Neither signatory may be related to the nominee.