



## Neighborhood Pin Approval Form

This signifies my approval of purchase of \_\_\_\_\_ **Daisy pin(s)** for presentation to:

PLEASE PRINT

Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____

Neighborhood Manager: \_\_\_\_\_ D/N: \_\_\_\_\_ Date: \_\_\_\_\_

This signifies my approval of purchase of \_\_\_\_\_ **Promise Award pin(s)** for presentation to:

PLEASE PRINT

Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____

Neighborhood Manager: \_\_\_\_\_ D/N: \_\_\_\_\_ Date: \_\_\_\_\_

This signifies my approval of purchase of \_\_\_\_\_ **Outstanding Leader pin(s)** for presentation to:

PLEASE PRINT

Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____
Name: _____	Position: _____

Neighborhood Manager: \_\_\_\_\_ D/N: \_\_\_\_\_ Date: \_\_\_\_\_

Daisy Pins, Promise Award Pins and Outstanding Leader Pins may be purchased only from the Girl Scout Shop. **This approval form must be presented at the time of purchase**, or must accompany a mail order. Make checks payable to: Girl Scouts of Eastern Missouri.