CERTIFICATION FORM

SILVER BRIGADE NEW MEMBER RECRUITER AWARD

Send the completed form to department headquarters on or before the May target date. Posts should retain a copy for their records.

The following member in the Department of			
Silver Brigadiers receive a silver pin and a s	ilver certificate.		
Name	Post number		
Address			
City	State	ZIP	
Phone ()	Member ID		
Number of new members enrolled (25 to 49))		
	 Post adjutar	nt (signature)	
Date	Address		
	 Date		

Department reminder: Forward a copy of this form to the National Membership Division, along with a copy of the list of new members signed up to National Headquarters, on or before the last day of May.

USE ADDITIONAL SHEETS IF NECESSARY