

SOUTH CARIBBEAN CONFERENCE - NATIONAL CLUB OPERATIONS COUNCIL

Request for Badges

Name of Star/ Chip/Award/Honour	Name of Recipient	Church/Club	Certificate Completed or Instructor's Name	Order Date: _____ Order Requested By: _____ Contact Number: _____ E-mail Address: _____ Position at Club: _____ Amt. Paid: \$ _____ Bal. \$ _____	
				OFFICIAL USE/STATUS UPDATE	
				Ordered & Awaiting Arrival _____ Items out of stock and need to be reordered _____	
				PARTIALLY DELIVERED: _____ Completely Delivered & CLEARED: _____ Completely Delivered But not Cleared: _____	
				CLUB OFFICIAL	
				Instructor's Name _____ <div style="display: flex; justify-content: space-around;"> BLOCK SIGNATURE </div>	
				<div style="display: flex; justify-content: space-around;"> _____ _____ </div> <div style="display: flex; justify-content: space-around;"> BLOCK SIGNATURE </div>	
				<div style="display: flex; justify-content: space-around;"> _____ _____ </div> <div style="display: flex; justify-content: space-around;"> BLOCK SIGNATURE </div>	
				Club Director Name: _____	
				Signature: _____	