

National Summertime Pack Award Application



Cub Scout Pack No. _____ of Chartered Organization _____ Name _____

has qualified for this award by conducting a pack activity in the summer months of _____
Year

	JUNE	JULY	AUGUST
Type of pack activity	_____	_____	_____
Number of dens participating	_____	_____	_____
Number of dens qualifying (50 percent of the den's Cub Scouts participating)	_____	_____	_____
Number of the pack's Tiger Scouts participating	_____	_____	_____
Number of the pack's Wolf Scouts participating	_____	_____	_____
Number of the pack's Bear Scouts participating	_____	_____	_____
Number of the pack's Webelos Scouts participating	_____	_____	_____
Number of parents/family members participating	_____	_____	_____

Please send us the following National Summertime Pack Award items:



One Pack Award Certificate, No. 33731



_____ Tiger pins, No. 14332



_____ Wolf pins, No. 14333



One Pack Award Streamer, No. 17808



_____ Bear pins, No. 14334



_____ Den participation ribbons, No. 616254



_____ Webelos pins, No. 14335



BOY SCOUTS OF AMERICA®

SUMMERTIME ACTIVITIES TRACKING SHEET

JUNE

Leader(s) responsible _____

Pack activity _____

Location _____ Date _____ Time _____

Number of dens that participated _____ Number of dens with at least 50 percent of members present _____

Number of Tiger Scouts participating _____ Number of Wolf Scouts participating _____

Number of Bear Scouts participating _____ Number of Webelos Scouts participating _____

Number of parents/family members participating _____

Comments _____

JULY

Leader(s) responsible _____

Pack activity _____

Location _____ Date _____ Time _____

Number of dens that participated _____ Number of dens with at least 50 percent of members present _____

Number of Tiger Scouts participating _____ Number of Wolf Scouts participating _____

Number of Bear Scouts participating _____ Number of Webelos Scouts participating _____

Number of parents/family members participating _____

Comments _____

AUGUST

Leader(s) responsible _____

Pack activity _____

Location _____ Date _____ Time _____

Number of dens that participated _____ Number of dens with at least 50 percent of members present _____

Number of Tiger Scouts participating _____ Number of Wolf Scouts participating _____

Number of Bear Scouts participating _____ Number of Webelos Scouts participating _____

Number of parents/family members participating _____

Comments _____

Date needed _____ Cubmaster signature _____

Pack committee chair signature _____

Send to _____

Name

Street, city, state, zip code

TO ASSURE PROMPT RECOGNITION, SUBMIT APPLICATION TO LOCAL COUNCIL SERVICE CENTER AS SOON AS POSSIBLE AFTER YOUR AUGUST ACTIVITY.