

Troop 23 Merit Badge Counseling Blue Card Data

Scout's Name

Requirement No. and letter	Date of approval	Counselor initial	Requirement No. and letter	Date of approval	Counselor initial

This applicant has personally appeared before me and demonstrated to my satisfaction that he has met all the requirements for the (please print)

Merit badge

Name of counselor

Address of counselor

City _____ Zip code _____

Telephone No of counselor

_____ / /

Signature of counselor _____ Date _____

Scout's Name

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Merit badge

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Address of counselor

City _____ Zip code _____

Telephone No of counselor

_____ / /

Signature of counselor _____ Date _____

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