## **OA Election Form**

		Unit Leader Email:	Unit Lu				
		Unit Leader Address:	Unit Lo				
		Unit Leader Printed Name:	Unit L				
		Unit Leader Signature:	Unit Lo	ignatures	n Team S	OA Election Team Signatures	
	e of this form	understand the requirements on the cover page of this form	underst	Number elected:	Nı		
read and	nd that we have	and approve them as nominees for election and that we have read and	and app	Number of ballots turned in:	nber of bal	Nun	
cations,	member qualifi	members are eligible, according to the youth member qualifications,	membe	to be elected:	s required	Number of votes required to be elected:	
th	the above you	As unit leader, I certify, by my signature, that the above youth	As unit	to be elected:	rs eligible	Number of Members eligible to be elected:	
					legibly.	*These are required. Please print legibly.	*These are re
	1						
	<u> </u>						
Elected	Birth Date*	Phone (Parents)*	; /Zip*	Street/City/State/Zip* Email (Parents)*	Rank*	Last Name*	First Name*
	see cover page)	Scoutmaster/Varsity Coach must read and certify the unit election and membership requirements prior to unit elections (see cover page)	ction and membership	certify the unit ele	t read and	Varsity Coach must	Scoutmaster/
	Arrow ncil #107 etu #407 Form	Order of the Arrow Grand Teton Council #107 Shunkah Mahneetu #407 Unit Election Form	STUDJS YOR ATT	n □ Yes □ No	Date of Election old an election □	gible to he	Troop # Is Troop or Team eli Location of Election District