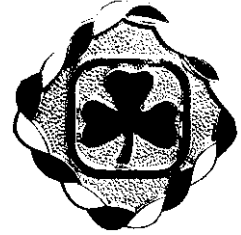


Canada Cord Certificate Request Form



GUIDERS:

- ◆ Complete and forward to your Area Commissioner for signature
- ◆ Allow **two weeks** upon receipt at provincial office for processing

	Unit name & responsible Guider's full name	Date program completed
1		
2		
3		
4		
5		
6		

Requestor's name & e-mail/phone # _____

Date certificate required (specific date, not ASAP) _____

Ceremony date (will appear on certificate as date of issue unless alternate instructions are provided) _____

Delivery method (check one)

- Mail via Xpresspost to
- Courier to (note that cost will be charged back to your area)

Name, address & e-mail/phone #

- Pick up at provincial office by (at 3rd floor volunteer pick-up desk)

Name & e-mail/phone

Additional instructions _____

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AREA COMMISSIONERS:

- ◆ Please complete this section, and send form to **committee assistant** at provincial office via e-mail (comassist@bc-girlguides.org) or fax (604-714-6645)

Area Commissioner's signature _____

Area _____

Date _____

FOR OFFICE USE ONLY		WO # _____	Date received _____
<input type="checkbox"/> iMIS	<input type="checkbox"/> Db	<input type="checkbox"/> Entered	<input type="checkbox"/> Date mailed _____