NATIONAL LUTHERAN ASSOCIATION ON SCOUTING
RECOGNITION REQUEST AND ADDRESS UPDATE FORM
FOR LOCAL ASSOCIATIONS OR COMMITTEES

MISSION STATEMENT
“To equip Lutherans and other Christians to minister to young people, using the programs of partner youth serving agencies”

VISION STATEMENT
“That all young people and their families are exposed to Jesus Christ and have an opportunity to know Him as their Lord and Savior”

Local Associations and Committees are recognized by NLAS to provide local support and contacts for our widely scattered membership. By working together, we can accomplish much more than we can as individuals. Upon receipt of completed annual recognition request forms, NLAS issues a Certificate of Recognition, provides copies of the Lutheran Scouting newsletter and makes available a website and materials to facilitate local ministries, e.g., the Lutheran Religious Emblems program, Camp Chaplains, etc.

Please complete or update all information and mail to:

**National Lutheran Association on Scouting**
11123 S. Towne Square, Suite B
St. Louis, MO 63123-7816

**FOR THE YEAR JUNE 1, ______ THRU MAY 31, ______**

**CHECK APPROPRIATE CATEGORY: RENEWAL ( ); NEW ( ); CHANGE ( )**

There is a $5 postage/handling fee for each Certificate of Recognition which is mailed to the President/Chairperson. This fee should be included with the completed application and mailed to the address above. Checks should be made payable to NLAS.

**NAME OF LOCAL ASSOCIATION OR COMMITTEE**

________________________________________________________________________

**PRESIDENT OR CHAIRPERSON:**

________________________________________________________________________

**ADDRESS:**

________________________________________________________________________

**CITY:** __________________________ **STATE:** __________________________ **ZIP + 4:**

**PHONE:** __________________________ **EMAIL:** __________________________

**SECRETARY:**

________________________________________________________________________

**ADDRESS:**

________________________________________________________________________

**CITY:** __________________________ **STATE:** __________________________ **ZIP + 4:**

**PHONE:** __________________________ **EMAIL:** __________________________

The members of our group are three or more in number. We subscribe to and wish to further the mission and vision of the National Lutheran Association on Scouting and petition for recognition by NLAS. A copy of our constitution, bylaws or similar document is enclosed ( ) or has been previously submitted ( ).

**Signature of President or Chairperson:** __________________________ **Date:** __________________________

http://www.nlas.org