# BOY SCOUTS OF AMERICA
# SUWANNEE RIVER AREA COUNCIL

Prepared. For Life.™

**To:** All Registered Volunteers and Scouting Families

**From:** Kevin Kilduff, Scout Executive

**RE:** 2017 Eagle Scout, Silver Beaver and Council Recognition Dinner

The Suwannee River Area Council, Boy Scouts of America recognizes the best of the Council's youth and the best of its adult leaders at our Annual Eagle Scout and Silver Beaver Award Recognition Dinner each year. This Dinner celebrates the success of our Council's youth in achieving the rank of **Eagle Scout**, Scouting's highest youth award, together with recognizing those adult leaders receiving the **Silver Beaver** Award for their noteworthy service of exceptional character to youth.

Please join us for this special night of Scouting on ***Thursday, January 25, 2018 at 6:30*** *pm* at *Saint Paul's United Methodist Church, Sanders Hall, 1700 N. Meridian Road, Tallahassee, Florida*. An outstanding program is planned for you.

The cost to attend is only $20.00 per person. Please complete the form below to reserve your seat. Please make checks payable to the Boy Scouts of America, and submit your check or your credit card information for Visa, MasterCard, Discover or American Express charge along with the reservation form below by **January 19, *2018*** *(reservations are limited and will be accepted on a first come first serve basis).*

We look forward to seeing you at our *Annual Council Eagle Scout and Silver Beaver Recognition Dinner* on Thursday, January 25, 2018!

***Return reservation form below by Friday, January 19, 2018.***

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**Suwannee River Area Council Silver Beaver/Eagle Scout Recognition Dinner**

*Mail to: Annual Banquet, BSA, 2032 Thomasville Road, Tallahassee, FL 32308*
*FAX: 850 575-6991 OR Email: Billy.Hartsfield@scouting.org*

***Reservation Form***
***January 25, 2018 – 6:30 p.m.***

*Name:* _____

*Address:* _____

*City, State, Zip Code:*_____

_____Tickets x $20.00 each $_____Total Enclosed

***Payment Method:***

( ) Check # _____enclosed ( ) Visa ( ) MasterCard ( ) Discover ( ) American Express

Name on Card:_____ *Phone Number:*_____

Card Number:_____ Expiration Date:_____