



2026 Discount Card Patch Distribution Form

District: _____ **Date:** _____

Pack # _____ **Troop (BT) #** _____ **Troop (GT) #** _____ **Crew #** _____ **Ship #** _____

Unit Leader Name: _____

Unit Leader Phone: () **Unit Leader E-mail:**

Scouts who sell 10 cards or more earn a patch!

Signature: _____ **Printed Name:** _____

Council Staff Initials: