



Superactivity of the Year Award

Des Plaines Valley Council

VLC Recognition Event

Crew Number: _____ Advisor: _____ Youth Leader: _____

Chartered Organization; (town): _____

Name of Superactivity: _____

Location & Date Held: _____ #of Crew Participants: _____

Write a short summary (1 page limit) explaining the unit's activity and why you feel the unit should be awarded the Superactivity of the Year Award. Feel free to attach any other newspaper articles or pictures of the activity.

Nominated by: _____ Phone # _____

Date Submitted: _____

***All nomination forms must be submitted by January 15**