

EDEN PRAIRIE FOUNDATION EAGLE SCOUT AWARD

EAGLE SCOUT: _____

ADDRESS: _____

PHONE #: _____ TROOP #: _____

DATE, TIME AND PLACE OF COURT OF HONOR: _____

DESCRIPTION OF EAGLE SCOUT PROJECT: _____

OTHER RELEVANT INFORMATION ABOUT EAGLE SCOUT AND/OR THE ORGANIZATION HE IS DONATING THE \$100 AWARD TO: _____

NAME, ADDRESS, CONTACT PERSON & PHONE # OF NON-PROFIT/TAX-EXEMPT ORGANIZATION TO WHICH THE \$100 AWARD (HONORARIUM) WILL BE DONATED IN THE NAME OF THE EAGLE SCOUT:

NAME OF ORGANIZATION: _____

CONTACT: _____

ADDRESS: _____

PHONE #: _____

FEDERAL TAX ID #: _____

EAGLE SCOUT WILL PRESENT CHECK TO THE ORGANIZATION: _____

FOUNDATION SHOULD MAIL CHECK DIRECTLY TO ORGANIZATION: _____

COMPLETED FORM MUST BE RECEIVED 2 WEEKS BEFORE YOUR COURT OF HONOR. PLEASE MAIL OR E-MAIL FORM TO: LAURA HOOKOM, EXECUTIVE DIRECTOR ● EDEN PRAIRIE FOUNDATION ● 8080 MITCHELL ROAD EDEN PRAIRIE, MN 55344 ● EXECDIR@TEPCF.ORG ● (C) (952) 210-5213