

My Story is a Texas Story Patch Order and Evaluation Form

Leader's Name: _____

E-Mail: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Council Name: _____ Troop # _____

Age of Participants: _____ Girl Scouts Boy Scouts

Which Section and Activities did the participants like best?

Section: Personal Identity Community Identity Texas Identity Texas and the World

Activity #(s): _____

Why? _____

Were the activities age appropriate? yes no

If no, why? _____

What special activities, if any, were planned in conjunction with this program?

What was the most valuable aspect of the program?

Additional comments or recommendations:

Your overall rating of this program is: Excellent Very Good Good Fair Poor

ORDER:

Number of Patches: _____ X Cost of Patch: \$1.00 = Total Amount Enclosed: \$ _____

Mail form to: The Texas State History Museum
Attention: Scout History Patch
P.O. Box 12874
Austin, Texas 78711