



AYLUS-AYLF

CERTIFICATE

THIS CERTIFICATE IS PRESENTED TO

FOR CONTRIBUTING

(HOURS)
COMMUNITY SERVICE

DURING _____
WITH AYLUS _____ BRANCH



Branch Advisor's Name and Phone Number (Required)

Branch Advisor's Signature (Required)

Alliance of Youth Leaders in the United States

www.aylus.org

aylfus@gmail.com



Leadership
Integrity
Innovation

Member Information

Last name:	First name:	Branch name:
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