

Religious Emblem of Faith Application

(Please Print)

Scout Unit #: _____ Parish: _____

Candidate's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Home Phone: () _____ - _____ Work Phone: () _____ - _____

School Name: _____ Grade: _____ Age: _____

(Please Print)

Scout Leader Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Home Phone: () _____ - _____ Work Phone: () _____ - _____

Program Completed

☐ Family of God ☐ I Live My Faith ☐ Marian Medal ☐ A Spirit Alive [Place an "X" next to the emblem just completed.](#)

Candidate's Certification

On my honor as a Scout and Catholic, I certify that I have faithfully fulfilled all the requirements for the Religious Emblem above.

Scouts signature: _____ Date: ____ / ____ / ____

Parent's Certification

I hereby certify that the above named Scout has successfully completed the work required for the Religious Medal identified above.

Parent's signature: _____ Date: ____ / ____ / ____

Adult Advisor Recommendation

I certify that this scout has appeared before me with her Activity Book. I have reviewed its contents and I therefore recommend her for the Religious Medal identified above.

Adult Advisor's signature: _____ Date: ____ / ____ / ____

Parish Priest's signature: _____ Date: ____ / ____ / ____

Return this application to:

Catholic Committee on Scouting

Attn: Harvey Carter

9100 Crockett Road

Brentwood, TN 37027