

Application to Diocesan Youth Director for *I Live My Faith* Medal

Please print legibly or download the PDF from catholicreligiousrecognitions.org and complete the form electronically.
Parent/Guardian: By signing the application you give permission for the diocese to reprint your child's name and image in any articles, press releases, and publicity efforts.

Applicant _____

Grade _____

Address _____

City _____ State _____ ZIP Code _____

Telephone Number _____

Sponsored by (parish, organization) _____

Adult Adviser _____

Address _____

City _____ State _____ ZIP Code _____

Telephone Number _____

Parish _____

Having completed the program in the *I Live My Faith* Project Book and having complied with the diocesan procedures for the presentation of the *I Live My Faith* Medal, I now apply for this medal.

Signature of Applicant _____ Signature of Adult Adviser _____
Youth Parent

Date _____
Mentor Parish Designate

I would like to receive the medal only. I would like to receive both the medal and the patch.

Please forward this application to the office of the diocesan youth director.

To Be Completed by the Diocese

Date Received _____

Presentation Date _____