

CATHOLIC DIOCESE OF RICHMOND

SCOUT RELIGIOUS EMBLEM FACILITATOR APPLICATION

PERSONAL INFORMATION

First Name: _____ Last Name: _____

First/Nick Name for Badge: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Parish Name: _____ City: _____

Circle one: Boy Scouts Venturing Girl Scouts American Heritage Girls Other: _____

Troop/Unit #: _____ Location or Charter Organization: _____

Role in or Relationship to Troop/Unit: _____ I have completed all and any required scout Youth Protection/ paperwork **YES** **NO**

SAFE ENVIRONMENT

All adults who participate in a youth event sponsored by the Office for Evangelization of Youth and Young Adults must be in compliance with the Diocesan Safe Environment Policies. Please indicate that you have completed each component listed below:

YES **NO** Screening One (completed every 5 years)

YES **NO** VIRTUS Training (completed once)

PASTOR RECOMMENDATION

I, the undersigned, certify that the above-mentioned person (applicant) is a Catholic in good standing and member of my parish. I further endorse this person as a Religious Emblems Facilitator with the duty and responsibility of guiding the faith development of Catholic youth.

Pastor Signature: _____ Date: _____

USE OF PICTURES AND/OR VIDEO

*I give permission for pictures and/or video of myself engaged in activities related to any Diocesan event to have those pictures and/or video posted in the Diocese of Richmond publications or websites. Names of participants **will not** be used without expressed permission from the participant. If no box is checked below, the Diocese of Richmond assumes you give permission.*

YES **NO** Adult Signature: _____ Date: _____