

Light of Christ Emblem Application

(To be filled out by a parent/guardian) Please print.

Last name _____ First name _____

Address _____

City _____ State _____ Zip code _____

Telephone No. _____ Age _____ Grade _____

Diocese _____ Name of parish church _____

Pack No. _____ Pack chartered organization _____

City _____ State _____ Council _____

Certification

I hereby apply for the Light of Christ emblem. I have completed all of the requirements to the best of my ability.

Cub Scout signature Date

Attested by

Parent/guardian

Religious Emblems Coordinator/Tiger Cub or Den Leader

Qualification: The above-named Cub Scout is registered with the Boy Scouts of America and is either a Tiger Cub or Wolf Cub Scout.

Cubmaster

Pastoral Approval

I certify that this Scout has appeared before me with his *Light of Christ Activity Book*. He has met all the conditions required by the program. I therefore approve him for the Light of Christ emblem and will arrange a suitable parish ceremony for the presentation.

DATE

Pastor or Parish Administrator (or delegate)

Diocesan Record

Date application/fee received _____ Date recorded _____

Date emblem mailed _____ Date presented _____

Diocesan Chaplain approval _____

