Diocese of Dallas
Notification of Intent to Begin a *Pope Pius XII* Program

Date of Notification:

Counselor Information:

Name:

Address:

City: State: **TX** Zip:

Phone number home: Business: cell:

Parish:

Date of my current religious emblem's advisor training certificate:

_____

Date of my current Boy Scout Youth Protection Training certificate:

_____

Pastor's Approval:

I hereby certify that the above named person is a member of my parish, and that I have no objections to his/her functioning as a youth minister to youth in the *Pope Pius XII* Religious Emblems program.

_____ _____

Pastor of his designate Date

Program Information:

Date program is to start: _____ Anticipated number of participants: _____

Location of meetings: _____

Address of meetings: _____

Day of week meetings to be held: _____

Frequency of meeting: _____

Time of meeting _____

Person Assisting Information (If more that one person is providing assistance then submit the same information for each additional person on a separate piece of paper.)

Name:

Parish:

Date of current religious emblem's advisor training certificate:

_____

Date of current Boy Scout Youth Protection Training certificate:

_____

Revised 7/19/07