

FAITH IN ACTION

THE CYMFED NATIONAL CATHOLIC AWARD SCHEME

PARTICIPATING ORGANISATION REGISTRATION FORM

| <i>Contact details for Award Scheme Co-ordinator</i> | | | |
|--|---------------|---------------|-------------|
| Participating organisation (parish/school etc.) | | | |
| Diocese | | | |
| Name of award scheme coordinator (the key contact in participating organization) | | | |
| Address: | | Email: | |
| | | Phone: | |
| <i>Timeframe</i> | | | |
| Proposed Start date of scheme: | | | |
| Planned date of completion: (When awards are presented) | | | |
| Estimated total number of participants: | | | |
| <i>Estimated number of Awards</i> | | | |
| Pin Level: | Bronze Level: | Silver Level: | Gold Level: |
| | | | |
| <i>Please note that orders for certificates and award badges must be placed with CYMFed with at least 6 weeks notice</i> | | | |
| <i>Please return this form to: Address of Awarding Authority</i> | | | |

