

Application for The God in Me Emblem

This is to certify that:

Candidate's Name _____ Age _____
Please type or print in black ink

Address _____

City _____ State _____ Zip _____

Is a member of (church name) _____

Address _____

City _____ State _____ Zip _____

Is an active member of the following national youth organization: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Cub/Boy Scouts | <input type="checkbox"/> 4-H Club |
| <input type="checkbox"/> Girl Scouts | <input type="checkbox"/> Unity |
| <input type="checkbox"/> Camp Fire | <input type="checkbox"/> Other youth group |

and has successfully completed the requirements for the God in Me Emblem. We recommend the participant be approved for this award.

Parent or Guardian's Signature _____ Date _____

Minister's Signature _____ Date _____

Counselor/Advisor's Signature _____ Date _____

Parent or Guardia's Name (Print) _____

Address _____

City _____ State _____ Zip _____

Daytime phone: _____



Mail to: The Association of Unity Churches International
PO Box 610, Lee's Summit MO 64063
Attention: Kathryn Kellogg

Fax: 816.525.4020 Attention: Kathryn Kellogg