

Clogher Diocesan Board of Religious Education

Bishop's Medal 2017- Entry Form

Please complete one entry form for each project.

Please print in **CAPITAL LETTERS** (details will be used for certificates)

Parish _____

Name of entrant	Age of entrant	Comments e.g Please indicate if entrant is Gifted or has Special Needs

I certify that this is the work of the young person above

Signed: _____

Name: _____

Position : Rector Sunday School Teacher Sunday School Superintendent
(Please circle as appropriate)

Address : _____

Telephone: _____

E-mail :

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Names of the entrant, their parish or the rector should NOT be on the projects.

