



DIOCESE OF VENICE IN FLORIDA

Youth and Young Adult Outreach

APPLICATION – YOM HASHOAH MEMORIAL PIN

The sole requirement to earn this award is attending one Diocese of Venice in Florida Yom HaShoah Memorial Ceremony.

Please print clearly or type

Name of applicant _____

Street Address _____

City and State _____ Zip code _____

Date of Birth _____ Phone no. _____

E-Mail Address _____

School attending _____ Present grade _____

Parish you are a member of _____

Type of Scouting Program Enrolled (Boy Scouts, American Heritage Girls, etc.):

Check this box if this is your second time attending the event

I hereby make application for the YOM HASHOAH MEMORIAL PIN. On my honor as a Scout, I certify that I have faithfully fulfilled the requirement for the YOM HASHOAH PIN to the best of my ability.

Applicant's Signature

To be completed by the Troop Leader/Parent/Guardian:

This is to certify that _____ has attended the Annual Diocesan Yom Hashoa Memorial Ceremony on _____ (Date).

Signature of Troop Leader/Parent/Legal Guardian

Mail to: Diocese of Venice in Florida, Office of Youth and Young Adult Outreach,
Attn: Scouting, 1000 Pinebrook Road, Venice, FL 34285.