

**REV. MICHAEL J. BADER MEMORIAL SCHOLARSHIP FUND
MEMBERSHIP CERTIFICATION**

Worthy Financial Secretary: Please complete this form and mail it immediately to the Scholarship Chairman so it will arrive on or before March 14th.

NAME OF APPLICANT: _____

NAME OF MEMBER: _____

COUNCIL LOCATION: _____ **COUNCIL #** _____

RELATIONSHIP OF APPLICANT TO MEMBER: _____
(SELF) (SON) (DAUGHTER) (WIFE)

I certify that the above information is true, to the best of my knowledge, and that the member above is in good standing in this council.

IN CASE OF DECEASED MEMBER:

I certify that the above information is true, to the best of my knowledge, and that the member above was in good standing in this council at the time of his death.

DATE

SIGNATURE OF FINANCIAL SECRETARY

COUNCIL NAME

COUNCIL SEAL

RETURN TO:
Kevin E. Legge, Chairman Fr. Bader
1804 Windhurst Drive
Hardy, Virginia 24101-3767
Phone: 540-890-3352
Email: kelegge@aol.com

****Late arrival will eliminate this applicant from Committee consideration.**