

Diocese of Fall River 2017 Pope St. Pius X Youth Award Cathedral of St. Mary the Assumption Tuesday, May 9th at 7PM

Parish:		City/Town:(Please Check One)		
	(Please Check C			
	☐ Idonotselectarecipientthisyear			
	☐ I select th	ne following recipient:		
Name [.]				
	(First)	(Middle)	(Last)	
			OT older than 19 years):	
Address:		(0):(
		(Street or P.U. Box)		
	(City/Town)	(State)	(Zip)	
_	(Home Phone #)		(Cell Phone #)	
Please detail the ministries. Ple	ne qualification of this recip	ient noting a <u>particular &</u> m if necessary.	exceptional devotion to the parish and its	
	(Pastor Signature) (Date)		Please Return this Form via Mail or Fax NO LATER than April 28, 2017 to: Pope St. Pius X Awards c/o Rose Mary Saraiva Office of Faith Formation 423 Highland Ave. Fall River, MA 02720 Fax: (508)675-3864	