



MASSACHUSETTS STATE COUNCIL KNIGHTS OF COLUMBUS



Altar Server of the Month Program

The following individual

NAME: _____ ADDRESS: _____
CITY/STATE/ZIP: _____ PHONE: _____

has demonstrated the highest commitment to his/her duties as an Altar Server in the community of _____ parish, in the Diocese of _____. It is my pleasure to recommend this individual for the honor of Altar Server of the Season (3-month period)

_____ Has distinguished himself /herself by:

Pastor Signature

Date

Note to the Pastor:

Thank you Father for participating in this recognition program. The program only requires a small amount of your time and the rewards are great for the individuals being recognized. Each nominee will receive an award certificate from the local council. The Council will submit the name of this individual to the state office for eligibility for the Altar Server at the State Convention.

Vivat Jesus

Council # _____ Month/Year _____
Grand Knight: _____

Attention Grand Knight:

After your council has issued the award certificate,
Please return this completed form to:

Massachusetts State Council
Knights of Columbus
Altar Server Program
470 Washington St. Suite #6
Norwood, Ma. 02062