

Honor Star Review (NIV) & Application

Girl's Name _____ Birthdate _____
 Church Name _____ Sponsor's Name _____
 Church Address _____ Sponsor's Address _____

Date Review Passed ___/___/___

Review Board Member Signature _____
 Review Board Member Signature _____
 Review Board Member Signature _____

Complete this portion before sending this review cover page to your district Missionettes coordinator.

I have completed my Activity Pages.
 I have read the entire New Testament.

Girl's Signature _____
 Sponsor's Signature _____
 Date _____

Date of Missionettes Celebration or Honor Star Ceremony ___/___/___

Pastor's Signature _____ Date _____

Send to your district Missionettes coordinator. Do you want the certificate to be sent to your church address or sponsor's address? (circle one)

For District Use Only

Application received ___/___/___

Certificate sent ___/___/___

Address sent to:

Application for Medals of Honor

Girl's Name _____

Address _____

Sponsor's Name _____

Telephone Number _____

Church Name _____

Name and Address certificate should be sent to:

Date of Missionettes Celebration or Awards Ceremony ___/___/___

Club	Year	Medal Requested (circle one)
Honor Daisy Award	_____	
Honor Prim Award	_____	
Honor Star Award	_____	Bronze _____
Friends Graduate	_____	Silver _____
Girls Only Graduate	_____	Gold _____

Medals are available from Gospel Publishing House.

For District Use Only

Application received ___/___/___

Certificate sent ___/___/___