FREE THROW PARTICIPATION REPORT FORM

Due By:
January 31

PLEASE INDICATE THE NUMBER OF PARTICIPANTS IN YOUR COUNCIL CONTEST:

AGE GROUPS	10	11	12	13	14	TOTALS
BOYS	_____	_____	_____	_____	_____	_____
GIRLS	_____	_____	_____	_____	_____	_____
TOTALS	_____	_____	_____	_____	_____	_____

KNIGHTS OF COLUMBUS
K OF C
FREE THROW CHAMPIONSHIP

CONTEST PARTICIPATION REPORT FORM:

Immediately following the local council contest, the grand knight should complete and submit the Free Throw Participation Form (FT-1) to the Supreme Council Department of Fraternal Services. This form provides the Supreme Council office with valuable participation statistics as well as feedback about the program in general.

PERSONAL COMMENTS OR OBSERVATIONS CONCERNING THE FREE THROW BASKETBALL PROGRAM:

_____

_____

_____

_____

SIGNED: _____
Grand Knight

COUNCIL NO. _____

CITY/TOWN _____

STATE/PROVINCE _____

MAIL ORIGINAL TO: Supreme Council Department of Fraternal Services
MAIL COPIES TO: State Deputy, District Deputy, Council File