

**CERTIFICATE OF ATTENDANCE\***  
**TEEN LEADER MINISTRY**  
**VOLUNTEER**  
**SAFE ENVIRONMENT SESSION**

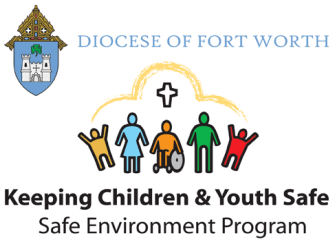
Pre-Teen's Legal Name :		DOB:
Telephone Number:		
Name of Parish/School that pre-teen will volunteer :		City:
Home Session Date:	Name of Parent/Guardian Facilitator(s):	

**How will your pre-teen volunteer at your parish/school?**

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**CERTIFICATE OF ATTENDANCE\***  
**TEEN LEADER MINISTRY VOLUNTEER SAFE**  
**ENVIRONMENT SESSION**  
**(for persons pre-teen- 11 & 12 Years Old)**

This certifies that \_\_\_\_\_  
*(Name)*

satisfactorily completed the "Teen Leader Ministry Volunteer" Safe Environment Session for Pre-teens, identified by type above, at home with a parent/guardian facilitator:

Home Address: \_\_\_\_\_ City/Zip \_\_\_\_\_

Session Date: \_\_\_\_\_

**\*CERTIFICATE INVALID WITHOUT FACILITATOR'S SIGNATURE**

Parent Facilitator 's Signature:	Facilitator's Printed Name:

*For Questions or Verification: Please Contact the Parish/School Office Hosting the Session at Phone #940-565-1770, and Ask to Speak with the Safe Environment Coordinator. Thank You.*