

P.R.I.D.E. RITUAL COMPETITION
Chapter Proficiency Entry Form

Chapter Name: _____ Year of Competition: _____

Check Applicable Boxes

| | | Member of this Chapter with DD* | Under Age 21 | Has Obligation Card |
|------------------|-----------------|--|--------------------------|---------------------------|
| Master Councilor | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Senior Councilor | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Junior Councilor | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Senior Deacon | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Junior Deacon | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Senior Steward | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Junior Steward | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Chaplain | Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sentinel | ** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Marshal | ** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Standard Bearer | ** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | *** Name: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* = Two parts may be borrowed from another chapter except for Master Councilor, Senior Deacon, or Chaplain. If borrowed parts are used, list home chapter of any borrowed part.

** = Part may be performed by any qualified person who is performing another part(s).
 Enter: "Done by _____" (e.g., "Done by Senior Deacon") for each part performed this way.

*** = List all additional parts used (use back of sheet if necessary)

I CERTIFY ON MY HONOR THAT ALL INFORMATION CONTAINED ON THIS FORM IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE

SIGNATURE: _____ TITLE: _____

NAME (Please Print): _____