

Delegate Certification  
Metropolis Board  
2009-2010

**To be completed by Parish Priest only**

Philoptochos Chapter # \_\_\_\_\_

Parish/City/State \_\_\_\_\_

1. Delegate's name \_\_\_\_\_

2. Delegate's name \_\_\_\_\_

3. Delegate's name \_\_\_\_\_

This **certifies** that the **delegate** names above as shown  
are **members in good standing** of this local Parish

date \_\_\_\_\_ Parish Priest

date \_\_\_\_\_ Philoptochos

President or Secretary

**Above information will be certified by the National Office**  
**Return by May 15, 2009 to: Metropolis of Atlanta Philoptochos**  
**2480 Clairmont Road NE**  
**Atlanta, Georgia 30329**

