

# 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	_____	_____	_____	_____	_____	_____



**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:

---

---

---

---

---

---

---

---

"I hereby certify and affirm that the information provided herein is true and accurate, to the best of my information and belief."

Grand Knight: \_\_\_\_\_  
Name
Member Number

COUNCIL NO. \_\_\_\_\_

CITY/ TOWN \_\_\_\_\_

STATE PROVINCE \_\_\_\_\_

---

---

---