

SILVER ROSE

LOG FORM

Sponsoring Council Name/Number	Location	Date	Number of Services Held	Number of Attendees	Miles Traveled

Jurisdiction Silver Rose Chairman:

Once the Silver Rose has completed its pilgrimage through your jurisdiction, add the total number of runners (if any) involved in carrying the Rose from location to location and estimate the total number miles traveled by the Rose in your jurisdiction.

Jurisdiction: _____ Total Services: _____ Total Attendees: _____

Runners (if any): _____ Total Miles Rose Traveled in Jurisdiction: _____

State Chairman Signature: _____



Email a copy of this document to: fraternalmission@kofc.org
 (Councils should also retain a copy of this completed form for their files)

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