

# GEPCP

## Master Memorization Award

Check with your District BQ Coordinator for MMA Deadline

### Church Information

Name \_\_\_\_\_ District \_\_\_\_\_ Region \_\_\_\_\_

Address \_\_\_\_\_  
Number Street Apt. City State Zip

Coach Name \_\_\_\_\_ Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_  
First Last #####-####

### Quizzer 1

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

A League  B League (or C, etc.)  MSQ  Experience

### Quizzer 2

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

A League  B League (or C, etc.)  MSQ  Experience

Chapter	Date Quoted	Witness' Name
Galatians 1		
Galatians 2		
Galatians 3		
Galatians 4		
Galatians 5		
Galatians 6		
Ephesians 1		
Ephesians 2		
Ephesians 3		
Ephesians 4		
Ephesians 5		
Ephesians 6		
Philippians 1		
Philippians 2		
Philippians 3		
Philippians 4		
Colossians 1		
Colossians 2		
Colossians 3		
Colossians 4		
Philemon		

Chapter	Date Quoted	Witness' Name
Galatians 1		
Galatians 2		
Galatians 3		
Galatians 4		
Galatians 5		
Galatians 6		
Ephesians 1		
Ephesians 2		
Ephesians 3		
Ephesians 4		
Ephesians 5		
Ephesians 6		
Philippians 1		
Philippians 2		
Philippians 3		
Philippians 4		
Colossians 1		
Colossians 2		
Colossians 3		
Colossians 4		
Philemon		

Date quoted in service \_\_\_\_\_

Sunday Morning  Sunday Evening  Wednesday  Other \_\_\_\_\_

Date quoted in entirety \_\_\_\_\_ Time \_\_\_\_\_

Signature of Coach \_\_\_\_\_

Date quoted in service \_\_\_\_\_

Sunday Morning  Sunday Evening  Wednesday  Other \_\_\_\_\_

Date quoted in entirety \_\_\_\_\_ Time \_\_\_\_\_

Signature of Coach \_\_\_\_\_

The signature of the coach below certifies that the person who listened to the student quote for their National Memorization Award has read and abided by all rules. They are a qualified individual of integrity and character and have strictly followed the rules and guidelines set forth for this award. The listener did not allow any cheating or bending of the rules for the student(s) recorded below.

Forms must be typed or completed in blue or black ink.

Mail or fax the completed form to your District Bible Quiz Coordinator by the due date they have established.