

Cast Application

Mesa Arizona Easter Pageant

Received: _____
(Staff use only)

Ecclesiastical Endorsement

Family Name or Individual Name

Bishop or Branch President's Name

Ward or Branch

Stake

Bishop/Branch President's Address

Bishop/Branch President's Work Phone

Bishop/Branch President's City State Zip

Bishop/Branch President's Home Phone

As bishop/branch president of the _____ Ward/Branch, I certify that the following applicant/applicants are active members of the Church of Jesus Christ of Latter-day Saints who live the standards of the Church and currently hold or are worthy of a temple recommend. By signing below, I certify that members of this family are worthy to represent the Church as cast members in the Mesa Arizona Easter Pageant.

If you are submitting a single application, please list your name.
If applying as a family, please list *each* family member.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Bishop/Branch President's Signature

Date

Note to Priesthood Leaders: If you have any questions or concerns, please email the Mesa Arizona Easter Pageant director, Jenee Prince, at easterpageant@easterpageant.org.

Note to Families: If you have a family member listed on this application who currently resides in another ward, please ask his/her current bishop to fill out and return a copy of this section of the application. ***Must bring to audition