

**ST. JOSEPH CATHOLIC CHURCH  
GENERATIONS OF FAITH  
'LOVE YOUR NEIGHBOR' REGISTRATION FORM**

Household Last Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
(Home or cell phone where we can contact you) (Program information & updates will be sent to this address)

Household Members who will be attending a Faith Festival – Please indicate each participant's faith-formation level from one of the following:

- A - Adult    H - High school (grades 9-12)    M - Middle school (grades 6-8)  
 E - Elementary school (grades K-5)    P - Preschool (ages 4 & younger)

First Name: \_\_\_\_\_ Level \_\_\_\_\_ Grade \_\_\_\_\_  
Please include last name if different from the household name (A, H, M, E, or P) (if applicable)



(Please mark here  and list additional names on the back

Total number of people who will attend the faith festival \_\_\_\_\_

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**Select a Faith Festival Date** (You are registering for ONE of the festival dates listed below)

Please circle the date/time you will attend. **The festival includes a simple shared meal.**

Tuesday evening <u>6:00 PM-9:00 PM</u>	Wednesday evening <u>6:00 PM-9:00 PM</u>	Saturday morning <u>9:00 AM-12 Noon</u>	Sunday afternoon <u>1:00 PM-4:00 PM</u>
3/6/2012	3/7/2012	3/10/2012	3/11/2012
(includes dinner)	(includes dinner)	(includes breakfast)	(includes lunch)

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**Registration Fee**

Includes program materials and meal. Payment can be made in cash (exact change) or check. Please make checks payable to 'St. Joseph Church', write 'Generations' on the memo line.

	<u>Fee</u>
Families (three or more people)	\$35
Two people (couple or parent & child)	\$22
Single adult	\$11

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I hereby authorize St. Joseph Church to use our pictures for church presentations, marketing, publicity, promotion and instruction.

X \_\_\_\_\_

<b>Office Use Only</b>
Payment Date: _____
Amount Recd: _____
Check No./Cash: _____

**Please return completed form and registration fee to the Parish Center Office.**