

PRE-CANA REGISTRATION

Sacred Heart Parish

169 Cummins Hwy, Roslindale, MA 02131
617-325-3322

Return completed form and registration fee to Sacred Heart Rectory, attention Maggie.

Space is limited. Register as soon as possible. Thank you.

Spring, 2014

March 24

Sunday

5:30 - 8:00 pm

March 28

Thursday

7:00 - 9:30 pm

March 31

Sunday

1:30 - 6:30 pm

(Please Print Clearly - As you wish your names to appear on the Program Certificate.)

Bride' Name _____ **Religion** _____

First Last

Address

Street City State Zip

Tel.# (Home) () - - - - - **(Work)** () - - - - - **ext** _____

E-Mail _____

Occupation _____ **Age** _____

Parish _____
Parish / Town

Groom's Name _____ **Religion** _____

First Last

Address

Street City State Zip

Tel.# (Home) () - - - - - **(Work)** () - - - - - **ext** _____

E-Mail _____

Occupation _____ **Age** _____

Parish _____
Parish / Town

Prospective Wedding Date _____
Month Day Year

Church of Wedding _____
Parish / Town

OFFICE USE ONLY:

Date of Registration _____ **Processed By** _____

Workshop Fee: \$75.00 **Type/#** _____ **Rec'd** _____ **By** _____

Team Assigned To: _____