

# Our Lady of Grace

## REGISTRATION OF PARISHIONERS

I/We wish to be enrolled as parishioners of Our of Grace. I/We want to be part of this faith community by participating in the Liturgy and Sacraments and supporting our parish and its activities. Kindly have my/our address on your mailing list.

NAME : \_\_\_\_\_  
*Please Print*

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

OTHER MEMBERS IN OUR FAMILY:

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_

# Our Lady of Grace

## REGISTRATION OF PARISHIONERS

I/We wish to be enrolled as parishioners of Our of Grace. I/We want to be part of this faith community by participating in the Liturgy and Sacraments and supporting our parish and its activities. Kindly have my/our address on your mailing list.

NAME : \_\_\_\_\_  
*Please Print*

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

OTHER MEMBERS IN OUR FAMILY:

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_

NAME & AGE \_\_\_\_\_ NAME & AGE \_\_\_\_\_