

# COMMUNION FOR DIVORCED AND REMARRIED CATHOLICS?

SUNDAY, MARCH 22<sup>ND</sup>, 2015

mail this form and your check to  
Credo Events  
c/o Tom Leith  
4434 Dewey Ave  
St. Louis, MO 63116  
(314-)435-8494

Become a supporting member now and take \$5 off each Forum Registration.

Gold \$50, Rose \$25, Green \$15 \$ \_\_\_\_\_

Registration: \_\_\_\_\_ @\$35.00 \$ \_\_\_\_\_

Group (8 or more) \_\_\_\_\_ @\$30.00 \$ \_\_\_\_\_

Total Enclosed..... \$ \_\_\_\_\_

Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs
Name: _____	<input type="checkbox"/> Lasagne	<input type="checkbox"/> Chicken	<input type="checkbox"/> Veggie	<input type="checkbox"/> Special Needs

More than eight? Use other side, separate sheet, or register online at <http://CredoStLouis.org>

Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

oYes! Subscribe me to the monthly e-newsletter

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_