

Who referred you to the Guild?

Member Name:

Event:



St. Clare of Assisi Women's Guild New Member Registration Form

Please Print Clearly

Full Name _____ Date _____

Street Address _____

City/State/Zip _____ (Required for Membership) Registered w/ St. Francis Yes / No

Home Phone _____ Cell Phone _____

Email _____

If you don't use email, your name will be added to a Calling Post List. Messages will be left about upcoming events.

Do you work outside the home? Yes / No Full / Part-time Occupation _____

Write in any special skill(s) (i.e., excel, word, accounting, people skills, organizing, leadership, creativity, event coordinator, etc.) that you possess.

Birthday: Month _____ Day _____ Marital Status _____

Nick Name _____ Partner's Name _____

Name to appear on badge _____ First Name or Nick Name Last Name

Committees you are interested in:

Mass(es) you regularly attend:

Table with 6 columns: Committee names (Bake Fest, Derby, Welcome, Hospitality, Prayer, Raffle, Sunshine, Anything, Special Events, Historical, Undecided) and Mass times (Saturday 4:00 pm, Saturday 5:30 pm, Sunday 7:30 am, Sunday 9:30 am, Sunday 11:30 am, Sunday 5:00 pm).

Committees noted will require fingerprinting through the Parish Office Make checks payable to: St. Francis of Assisi in the amount of \$25.00 Sorry, no credit/debit cards.

Please do not write below this line

Table with 8 columns for tracking registration progress: Date Paid, Cash Receipt #, Check #, Amount, Added to Roster, New Member Kit, Badge Ordered, Received Chaplet, Orientation Completed, Received Badge.