

St Jude Catholic Church

Welcome Weekend Experience

Registration Form

* Required Fields

* Registration Information

Name: _____

Phone: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

* Weekend Dates (Select One)

Men March 21 & 22, 2020

Women March 28 & 29, 2020

* Emergency Contact

Name: _____

Phone: _____

Prayers

Please list the name and phone number of those you would like us to contact to request prayers on your behalf.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Special Needs

Please indicate any special needs or requirements you may have for the weekend.

Please e-mail the completed registration form to welcomeweekend@stjudes.org or drop it off at the Parish Office