



CATHERINE OF SIENA
INSTITUTE

CALLED & GIFTED WORKSHOP

September 14, 2019

SPACE IS LIMITED !

REGISTER EARLY

This completed form with **your payment** should be returned to the Curé of Ars Parish Office **by August 30th, 2019.**

Non-refundable registration fees:

a. Parishioners: **\$25.00 X** ____ # attendees = \$____ Amount Due

Check # _____ or Cash Amount _____

b. Non-Parishioners: **\$45.00 X** ____ # attendees = \$____ Amount Due

Check # _____ or Cash Amount _____

****Please note: The Catherine of Siena Institute does not authorize the use of the inventory for anyone under the age of 21.**

Full name: _____ **Parish of Membership:** _____

Address: _____

City / State / Zip Code: _____

Email: _____ Phone: _____

PHOTO RELEASE for Curé of Ars

I acknowledge that photography and video may be taken as part of this activity and give my permission for Curé of Ars parish to display photos in any print media, broadcast/electronic media, and the parish website and other electronic/print forms of communication associated with Curé of Ars or the Archdiocese of Kansas City in Kansas.

By signing your name below you are agreeing to the Photo Release Statement for all registrants on this form.

Signature

Date

Printed Name

GROUPS: If bringing a group, please share any notes about your group, including the name & location:

Additional Attendees in the group (if listed, please include payment with this form):

Attendee Name	Email Address	Special dietary needs/ restrictions

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