The Blessed Virgin Mary Immaculate Queen of Peace Sodality

Saint Augustine Catholic Church

15th and V Streets North West Washington, D. C. 20009

APPPLICATION FOR ADMISSION INTO THE SODALITY

MEMBERSHIP TYPE: ☐ NEW MEMBER ☐ JUNIOR SODALIST ☐ TRANSFER _____

NAME: _____ D.O.B.: _____ Gender: F M

ADDRESS_____ Apt. No. _____

CITY_____STATE _____ ZIP CODE _____

TELEPHONE NO.:_____HOME_____CELL _____

EMAIL:_____@_____

If sponsored by a Sodality Member, list name here:

_____

SODALIST ARE REQUIRED TO BE CATHOLIC. NOTE PARISH WHERE YOU WERE BAPTIZED:

NAME OF PARISH: _____

DATE: _____ *ADDRESS:* _____

CITY: _____*STATE:* _____*ZIP CODE* _____*TELEPHONE NO.*_____

MEMBER OF SAINT AUGUSTINE'S CHURCH? Y N DATE JOINED: _____

WHICH MINISTRIES DO YOU BELONG TO?

_____

Printed Name: _____ ***Signature***_____ ***Date:*** _____

FOR USE BY THE PARISH OFFICE ONLY

Date Received: _____

Reviewed:

_____, Prefect:

_____

Signature and Date

Reverend Patrick A. Smith, Sodality Moderator

_____

Signature and Date

PLEASE PLACE THE CHURCH SEAL HERE

KINDLY FORWARD YOUR COMPLETED APPLICATION TO THE CHURCH OFFICE AT 1419 V STREET NW WASHINGTON, D.C. 20009 TO THE ATTENTION OF MS. BEATRICE JUDON. THANK YOU.

Updated - April 20, 2020