



# Catholic Family Services

Open hearts. Open minds. Open doors.

160 McIntosh Street  
Regina, SK S4R 4Z4

## Together in Christ Marriage Preparation Registration Form

### Registrant #1

Name:	
Street Address:	
City/Town & Province:	Postal Code:
Phone Number:	Email Address:
Do you attend Church: <input type="checkbox"/> Often <input type="checkbox"/> Occasionally <input type="checkbox"/> Not at all	

### Registrant #2

Name:	
Street Address:	
City/Town & Province:	Postal Code:
Phone Number:	Email Address:
Do you attend Church: <input type="checkbox"/> Often <input type="checkbox"/> Occasionally <input type="checkbox"/> Not at all	

### Other Information

Wedding Date:	Read Policy: <input type="checkbox"/> Yes <input type="checkbox"/> No
How did you hear about our Marriage Prep Course?	
<input type="checkbox"/> Referred by Parish <i>Parish Name &amp; Address:</i>	<input type="checkbox"/> Other (please specify): _____
Marriage Preparation dates you have secured:	
<input type="checkbox"/> December 9 <sup>th</sup> & 10 <sup>th</sup> 2022	<input type="checkbox"/> April 14 <sup>th</sup> & 15 <sup>th</sup> 2023
<input type="checkbox"/> February 10 <sup>th</sup> & 11 <sup>th</sup> 2023	<input type="checkbox"/> May 12 <sup>th</sup> & 13 <sup>th</sup> 2023
<input type="checkbox"/> March 10 <sup>th</sup> & 11 <sup>th</sup> 2023	<input type="checkbox"/> June 9 <sup>th</sup> & 10 <sup>th</sup> 2023

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

Date \_\_\_\_\_