

City_

Phone #1





Zip

Registration: Deepe	ening the Dominican Spirit June 26 - July	<i>y</i> 4, 2019
Deposit of \$300		
Name		CONTRACTOR OF PERSONS
Address		
City	State/Country	Zip
Phone (Home)	(Work)	
Email	Place of Ministry/Position	
Are walking and climbi	ing stairs difficult for you?	
Vegetarian or Food Alle	ergies?	
(Plea	ise make checks payable to Sisters of Saint Dominic and r	mail to the address below.)
	Emergency Contact Informati	ion
Participant's Name		
Emergency Contact		
Name	Relationship	
Address	Objects (Openingly)	
Спу	State/Country	Zip
Phone #1	Phone #2	
Registration: Deepe Deposit of \$300 Name Address	ening the Dominican Spirit June 26 - July	4, 2019
	State/Country_	Zip
	(Work)	·
Email ,	Place of Ministry/Position	
Are walking and climbi	ing stairs difficult for you?	
Vegetarian or Food Alle		
(Plea	use make checks payable to Sisters of Saint Dominic and r	mail to the address below.)
·	Emergency Contact Informati	ion
Participant's Name	<u> </u>	
Emergency Contact		
Name		
Address		

Phone #2

State/Country