



BUKÁS-LOÓB SA DIYÓS COVENANT COMMUNITY

**Archdiocese of Trenton
Family Encounter # 7, July 10-12, 2015
Ave Maria Retreat House, Doylestown, PA.**

PART I – BASIC INFORMATION

Husband's Last Name	Husband's First Name	Husband's Nickname	Husband's Date of Birth	
Wife's Last Name	Wife's First Name	Wife's Nickname	Wife's Date of Birth	
Residence Street Address		City	State	Zip
Home Telephone No.	Home Fax No.	Home Email Address		
Cell Phone No.	Anniversary	ME Class No.	LSS No.	
Occupation – Husband: _____ Wife: _____		Ministry:	Covenanted: Yes _____ No _____	
		FE Sponsor:	FE Sponsor Tel. No.	

PART II – CHILDREN:

Name (Nickname)	Date of Birth	Baptized (Yes or No)	Confirmed (Yes or No)	YLSS No.

**WE COMMIT TO PARTICIPATE IN ALL ACTIVITIES
AND THE CATHOLIC LITURGY DURING THE ENTIRE WEEKEND.**

SIGNED: _____
Husband
Wife

PART III – COST: \$280.00 PER FAMILY of 4; additional \$20 each child thereafter

PAYMENT:	CASH _____	CHECK _____/CHECK NO. _____	PAID IN FULL _____
DEPOSIT:	CASH _____	CHECK _____/CHECK NO. _____	* BALANCE: _____ (to be paid upon registration)
*If you wish to make other financial arrangements, please let us know.			
SPECIAL DIET NEEDED (if any):			

Please submit your recent family photo.