## ST. CATHERINE OF SIENA CATHOLIC CHURCH



Jame:			AGE:		
Address:		ZIP CODE:			
Home Phone:	e:Office phone:				
Cellular	r Email:				
Marital Status: Sing	le( ) Married(	) Separated( ) Di	vorced(	) WIDOWED(	
T-SHIRT SIZE: SMALL ()	MEDIUM () LA	rge ( ) X-large ( )	XX-large	()	
Any special health r	related issues c	r dietary needs? _			
PARISH:					
Name and phone nu					
DO YOU KNOW ANYBO	DDY THAT WILL E	e attending the re	ETREAT? Y	es ( ) No ( )	
IF YES, NAME OF THE P.	articipant				
Have you ever done	EMMAUS BEFOR	E?			
Do you need transf Cost of Retreat: \$140				NO ( )	
PAID IN CASH:	\$				
PAID WITH CHECK #:	\$	CK #		-	
Balance:	\$				
RETREAT HOUSE: SEPI 7700 SW 56TH ST, MIA	ami, FL 33155	MORE INFO: YUVITZA OLIV MARIA ANDU			

Please leave your application and deposit in an envelope addressed to **Women's Emmaus - English Retreat** at the parish office. Or mail to: **St Catherine of Siena Catholic Church, 9200 SW 107 Ave., Miami, Florida 33176.** Checks should be made out to: **Saint Catherine of Siena Catholic Church.**