



# Clergy/Religious/Seminarian Registration Form

Name \_\_\_\_\_

Phone Number (      ) \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

City/State \_\_\_\_\_

Zip Code \_\_\_\_\_

Name of Parish \_\_\_\_\_

Diocese \_\_\_\_\_

Priest ..... FREE

I wish to Concelebrate at Mass

Friday – Opening Mass (3:00 PM)

Saturday – Mass with Anointing of the Sick (8:00 AM)

Saturday – Candlelight Procession and Closing Mass (6:15 PM)

I am available to hear Confessions

Friday     6:00 PM     7:00 PM     8:00 PM     9:00PM

Saturday     3:00 PM     4:00 PM     5:00 PM     6:00PM

Deacon/Religious/Seminarian ..... FREE

I wish to assist at Mass

Friday – Opening Mass (3:00 PM)

Saturday – Mass with Anointing of the Sick (8:00 AM)

Saturday – Candlelight Procession and Closing Mass (6:15 PM)

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