

# CATHOLIC FAMILY SERVICES OF TORONTO

## RE-MARRIAGE PREPARATION REGISTRATION FORM

**GROUP DATES:** \_\_\_\_\_

**GROUP LOCATION:** \_\_\_\_\_ **GROUP #** \_\_\_\_\_

	Female	Male
Surname:		
Given Name:		
Previously Married:	YES <input type="radio"/> NO <input type="radio"/>	YES <input type="radio"/> NO <input type="radio"/>
Address:		
City, Prov, Postal Code		
Telephone Home: Business:		
Email:		
Religious Affiliation:		
Date of Marriage:		
Referred by:		

**REGISTRATION AND PAYMENT:** Enrolment is limited. You are not enrolled in the program until this registration form and payment is received by our office. Both individuals are expected to attend all sessions of the program in order to receive a certificate.

A cancellation fee of \$75.00 will apply to all registrations. A charge of \$10.00 will be made on cheques not sufficiently funded (NSF).

**VISA/MASTERCARD:** Card # \_\_\_\_\_ CVV# \_\_\_\_\_ Expiry Date \_\_\_\_\_

**Name on VISA/MASTERCARD card** \_\_\_\_\_

Send registration form along with completed VISA/MASTERCARD information above or with a cheque or money order in the amount of **\$350.00** payable to **Catholic Family Services of Toronto** to Attn: Marriage Preparation and Family Life Office, Catholic Family Services of Toronto, 1155 Yonge St., Ste. 101, Toronto, ON M4T 1W2

**I would like to receive emails from Catholic Family Services of Toronto in the future:**