CATHOLIC FAMILY SERVICES OF TORONTO

MARRIAGE PREPARATION REGISTRATION FORM

GROUP DATES:		
GROUP LOCATION: _		GROUP #
	Female	Male
Surname:		
Given Name:		
Previously Married:	YES O NO O	YES O
Address:		
City, Prov, Postal Code		
Telephone Home: Business:		
Email:		
Religious Affiliation:		
Date of Marriage:		
Referred by:		
		ot enrolled in the program until this duals are expected to attend all sessions of
A cancellation fee of \$25.00 v sufficiently funded (NSF).	vill apply to all registrations. A charge	of \$10.00 will be made on cheques not
AS WE DO NOT SEND OUT CONFIRMATION.	WRITTEN CONFIRMATIONS, YOUR	CASHED CHEQUE WILL ACT AS
	to Attn: Marriage Preparation and Far	mount of \$300.00 payable to Catholic mily Life Office, Catholic Family Services o
I would like to receive email	Is from Catholic Family Services of	Toronto in the future: