Prayer Enrollment Request Form

Dominican Nuns, Dominican Monastery of St. Jude, Marbury, Alabama

Your Information

Name:					
Address:					
	Street Address				
_	City		State	Zip code	(Country)
E-mail addr	ess:				
	ntact you by e-mail if v				
Would you	like to receive our twi	ce-yearly newslette	er? yes,	please no, tl	hank you
		Enroll	nent Inform	ation	
Enrollment	Type: Perpetual E	Enrollment Re	emembrance	in Prayer	
Name of pe	rson to be enrolled: _				
_	Living Deceased				
f deceased	: Relationship of the d	leceased to the per	son to whom	the enrollment is t	o be given:
_	For example: "For	your beloved husba	and/wife, gra	ndmother, friend"	· · · · · · · · · · · · · · · · · · ·
If living: Oc	casion/Intention:				
		For example: "On t	the occasion of	your anniversary" or	"For your health"
Enrolled by	:				
		Maili	ng Informat	tion	
Please se	end the enrollment ca	rd to me at the add	lress above: _	single envelope	(if for you)
			_	double envelope	(if for someone else)
Please se	end the enrollment ca	rd to the address b	elow:		
Name:					
Address:					
	Street Address				
	City		State	Zip code	(Country)
My donatic	un of \$	is enclosed (Die	ase make che	ocks navahle to Don	ninican Monastery of St

(The suggested donation for the Perpetual Enrollment card is \$20; for the Remembrance in Prayer card, \$10.)

Please send the completed form along with donation to: