

Our Lady of Refuge Church

11140 Preston Street, Castroville, Ca 95012

Phone: (831) 633-4015

Email: faith@olorc.org

For Office use only

Registration fee per adult **\$100**

Cash Card Check \$ _____

Received By: _____ Date: _____

Adult Faith Formation (18 years & older) Year 2024-2025

_____	_____	_____
Last name	First name	
_____	_____	_____
Date of birth	Age	Cell #
_____	_____	_____
Address	City	
_____	_____	
State	Zip	
_____	_____	_____
Emergency contact Name	Cell #	Relationship

- Are you baptized? Yes No
- If yes, baptized catholic? Yes No Other church _____
- Have you received First Communion? Yes No
- Marital Status: Single Married
Married: Civil in the Catholic Church Other: _____
- Catechism Class in: English Spanish

Responsibilities and Permissions

*****Students are required to attend Mass at Our Lady of Refuge Parish every weekend, especially the 1st Weekend of the month.**

1. Are you committed to attend faith formation sessions/classes regularly? Yes No
2. Are you committed to participate in Sunday Mass and Holy Days of Obligation? Yes No
3. I give my permission to Our Lady of Refuge to add my contact information to *Flocknote* and *faith@olorc.org* to receive text/email messages.

Signature

Date