



# SPIRITUAL WORKOUT A MEN'S CONFERENCE

Fathers of Mercy – Chapel of Divine Mercy  
806 Shaker Museum Rd., Auburn, KY 42206  
Saturday, June 30, 2012

## REGISTRATION FORM

*(PLEASE PRINT & REMEMBER, ALL ATTENDEES MUST BE 16 OR OLDER)*

### CONTACT PERSON:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

### NAMES OF OTHERS ATTENDING WITH YOU:

### Is a minor 16 or 17?

_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____
_____	Yes_____ No_____

### Payment Info:

\$20.00 per person \$\_\_\_\_\_ Additional donation to help defray costs \$\_\_\_\_\_

= \$\_\_\_\_\_ Total amount due

Form of Payment  Cash  Money Order  Check # \_\_\_\_\_

(Note for Priest: Priests wishing to concelebrate Holy Mass should bring their own alb and stole.)