

AT PRAYER WITH MARY SIGN-UP CARD



Name -----

Address -----

Telephone -----

Email -----

EITHER indicate the day and time you prefer

If you would be willing to host the meeting, click here

Day	&	Time			
<input type="checkbox"/> Monday		<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<input type="radio"/>
<input type="checkbox"/> Tuesday		<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<input type="radio"/>
<input type="checkbox"/> Wednesday		<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<input type="radio"/>
<input type="checkbox"/> Thursday		<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<input type="radio"/>
<input type="checkbox"/> Friday		<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<input type="radio"/>

Check here if you require handicap access

Location

Day/Time

SCC Leader

For administrative use

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