

Knights of Columbus – Orange County Chapter Charities

Day of Sharing – April 27, 2019

Registration Form

Facility or Home or Organization Name:		
Address	City	Zip
Facility / Home / Organization Phone #	Email:	
Point of Contact Name	Point of Contact Phone #	
Point of Contact Alternate Phone #	Point of Contact Email:	

Guests' Names - Attending	
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Caretaker Names - Attending	Caretaker - Attending Cell Phone
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

We will be taking pictures of this event and using those pictures to promote this event and the Knights of Columbus and our support of people with Intellectual Disabilities. Singing this form is your approval of this.

Approving Authority	
Printed Name:	
Signature:	Date:

DAY OF SHARING

APRIL 27, 2019

REGISTRATION

PLEASE REGISTER

THE BEST WAY:

SIGN UP ON THE WEB! It's easy and saves time!

GO TO: www.kofc6020.org

THE SECOND BEST WAY:

Email Form: Type in the fillable form on the above website

EMAIL TO: usmma89@verizon.net

THE OTHER WAY:

Fill out the form on the reverse and fax it to: 888-979-9114