

# Grace Within Registration Form

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_

Email \_\_\_\_\_

How long have you been a part of the parish community? \_\_\_\_\_

Do you have family living locally?  Yes  No

Have you ever been part of a facilitated small group?

Yes  No

Why are you interested in this group?

Intellectual  Spiritual  Psychological/Emotional  
 Social  Other (please be specific) \_\_\_\_\_

What are your expectations about this group?

What do you need from the persons in leadership?

Office Use Only: Date received \_\_\_\_\_ Amount Due \_\_\_\_\_ Paid \_\_\_\_\_ Scholarship \_\_\_\_\_