

REGISTRATION FORM  
ST. BASIL PRE-CANA PROGRAM  
SATURDAY, March 3<sup>rd</sup> 2018  
8:00 A.M. – 6:00 P.M.

Continental breakfast served from 8-8:30am

Pre-Canas aims to help couples talk about issues that may not have come up while they were dating, such as finances, raising kids, chores, family backgrounds, conflict resolution, and gender roles. A primary goal of the day is to provide couples with proven strategies for a loving, and faith filled marriage. We will provide morning coffee/juice with donuts/muffins and lunch.

**The cost is \$65.00 per couple. Space is limited.**

**Please fill out and return this registration form by February 12<sup>th</sup> 2018 along with your check payable to St. Basil Parish.**

**Registrations forms may not be accepted after February 12<sup>th</sup> 2018.**

PLEASE WRITE OR PRINT LEGIBLY. PLEASE COMPLETE ALL INFORMATION.

Wedding Date: \_\_\_\_\_ Wedding Ceremony Location: \_\_\_\_\_

Priest \_\_\_\_\_

**BRIDE INFORMATION (please fill out completely)**

Name \_\_\_\_\_ Preferred Name Tag Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Parish: \_\_\_\_\_ Previously Married? Yes / No

**GROOM INFORMATION (please fill out completely)**

Name \_\_\_\_\_ Preferred Name Tag Name \_\_\_\_\_

Address \_\_\_\_\_

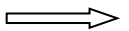
City/State/Zip: \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Parish: \_\_\_\_\_ Previously Married? Yes / No

Please return this form w/ payment to:

Robin Youngs in the parish office, 8700 Brecksville Rd. Brecksville, Ohio 44141

OVER 

**PLEASE WRITE/PRINT LEGIBLY. COMPLETE ALL INFORMATION.**

**BRIDE'S MOTHER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/**ZIP** \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-Mail \_\_\_\_\_

**BRIDE'S FATHER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/**ZIP** \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-Mail \_\_\_\_\_

**GROOM'S MOTHER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/**ZIP** \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-Mail \_\_\_\_\_

**GROOM'S FATHER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/**ZIP** \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-Mail \_\_\_\_\_