

ALL PARTICIPANTS



Diocese of Joliet

Life Office
101 W. Airport Rd.
Romeoville, IL 60446

www.dioceseofjoliet.org/life/
815-834-4065
Fax 815-838-8129

(Registrations are first come, first serve.)

DATE: _____

PARISH: _____
(Name and City)

SCHOOL ATTENDING: _____

GROUP NAME THAT YOU ARE ATTENDING WITH _____

I WOULD LIKE TO ROOM WITH: _____

TRANSPORTATION: Buses will depart from the St. Charles Borromeo Pastoral Center, 101 W. Airport Rd., Romeoville.

HOTEL: Full Time Student _____ Adult Double _____ Adult Single _____

Joliet March for Life 2012 REGISTRATION FORM

Check One: CHAPERONE _____ PARTICIPANT _____
(Chaperone must be 21 years of age or older)

LAST NAME: _____ FIRST NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: IL ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

PARTICIPANT E-MAIL ADDRESS _____

SEX: M F AGE: _____ DATE OF BIRTH: _____

SIGNATURE OF PARENT: _____ (Required for those 18 years of age or younger)

E-MAIL ADDRESS OF PARENT: _____

PARENT CELL PHONE NUMBER: _____

PLEASE INCLUDE THE FOLLOWING WITH REGISTRATION

- ✓ Registration form
- ✓ **Non-refundable \$100.00 deposit due on or before November 1, 2011.**
*\$25.00 late fee, if received after deadline.
- ✓ **FULL payment due on or before December 9, 2011.**
- ✓ Please make checks payable to the Diocese of Joliet Life Office.
- ✓ **Protecting God's Children Workshop** Certificate and background check for **all participants 18 years of age and older.**
- ✓ Background Check Volunteer Release Form (18 years of age and older)
- ✓ Permission Slip with code of behavior, medical permission and insurance information.
- ✓ Adult Medical Information Form (18 years of age and older)
- ✓ Those seeking financial assistance must submit all forms and documents no later than **November 1, 2011.**