

## VOCARE #24 Registration Form

**Vocare #24 - May 16-18, 2008**

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Do you have Facebook?: Y / N

Date of Birth: \_\_\_\_\_

Gender M / F (circle one)

T-shirt Size: S M L XL XXL

### **Emergency Contact**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Dietary Needs or Allergies we need to be aware of? Y / N

Please List: \_\_\_\_\_

**EMAIL/MAIL REGISTRATION FORM AND A CHECK FOR \$40 TO:**

**VOCARE**

Diocese of West Texas

111 Torcido Dr.

San Antonio, TX 78209

or

**Contact:** Stacy Dowdy at [stacy.dowdy@dwtx.org](mailto:stacy.dowdy@dwtx.org)