



NAME

PREFIX FIRST

MI LAST

SUFFIX

ADDRESS

LINE 1

CITY

LINE 2 (OPTIONAL)

STATE ZIP

EMAIL

PHONE

MOBILE

PREFERRED MODE OF CONTACT

EMAIL

PHONE

MAIL

PARISH

BEST TIME TO ATTEND EVENTS

DAY

NIGHT

WEEKENDS

TYPES OF EVENTS I'M INTERESTED IN

GUEST SPEAKER

SITE VISIT

SERVICE PROJECT

HAPPY HOUR

(CHECK ALL THAT APPLY)

OTHER

WHAT I'D LIKE TO GET OUT OF THIS GROUP

HOW I HEARD ABOUT THE GROUP

Please return this form to The Roman Catholic Foundation
425 North New Ballas Road, Suite 200 | St. Louis, Missouri 63141
Pay via check or online at rcfstl.org/themarthas
themarthas@rcfstl.org | 314.918.2890 |

I HAVE PAID ONLINE

A CHECK IS INCLUDED WITH THIS MEMBERSHIP FORM (PAYABLE TO THE ROMAN CATHOLIC FOUNDATION)