

DATE / TIME:

LOCATION:

PRICE: THEME: FROM:

\$130 PER PERSON

To:





SERVANTS

FRIDAY, AUGUST 14TH AT 8:00 A.M.

SUNDAY, AUGUST 16^{TH} AT 4:00 P.M.

"...WHERE YOUR TREASURE IS, THERE YOUR HEART WILL BE ALSO."

DURHAM COLLEGE, 2000 SIMCOE ST. NORTH, OSHAWA, ON.

REGISTRATION/PERMISSION FORM 17TH ANNUAL C.O.O.L. CONVENTION FOR STUDENTS WHO COMPLETED GRADES 7 OR 8

					-Matthew 6:21				
In order to register as a servant for the Confession must sign this form pumbers, O.H.I.P. numbers, signature	permitting y s or other in	/ou to formatio	serve i n will be	n this ca considere	pacity . ed incomp	Forms rolete.	nissing er	nergency	telephone
17 th Ann	NUAL C.O.O								
Name of Servant:									
E-Mail (print clearly):									
Name of Church:									
Home Tel. #:		Er	nergency	Tel.#					
Home Address:									
O.H.I.P.#	Medic	ations/All	ergies/Co	onditions:_					
T-Shirt Size (circle one):	XS, S,	M,	L,	XL,	XXL.				
Allergies/ Medical conditions/ Medications	:								
+FATHER OF CONFESSION: Fr					SIGN	ATURE:_			
	(Name								
						Date:			