



CHICAGO MARRIAGE ENCOUNTER

Weekend Registration Form

Names: _____

Address: _____

Phone/s: _____ Wedding date: _____

Religious Affiliation/s: _____

How did you hear about Marriage Encounter? _____

Weekend Information

Location: St. Bede's Parish, Ingleside, IL

Dates: TBA

Nonrefundable Deposit: \$ 50.00

For more information contact: Frank and Ann Wach at 847-546-0929 or annwach@comcast.net

TO MAKE A RESERVATION: Print and mail this application along with your \$50.00 deposit check (made payable to "Chicago Marriage Encounter") to:

Chicago Marriage Encounter

c/o Frank and Ann Wach

34510 N. Hickory Court

Ingleside, IL 60041

FOR OFFICE USE ONLY

Date Deposit Received: _____ C.M.E. Area: _____

Check Number/Date: _____ Date Confirmation Sent: _____

Check Amount: \$ _____ Date Map & Instructions Sent: _____