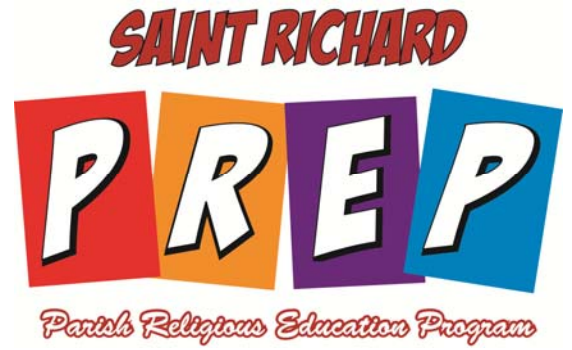


Family Participation Slip

Family Name: _____

Event: _____

Date of Event: _____ Check One (1): Service
 Spiritual

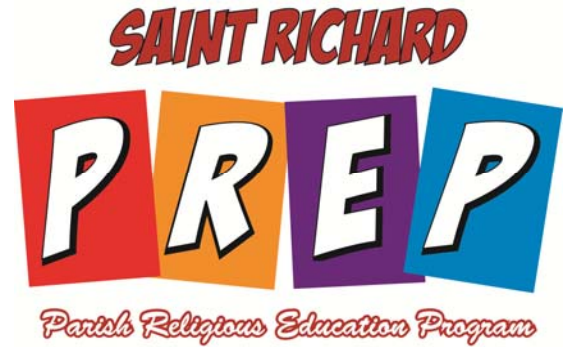


Family Participation Slip

Family Name: _____

Event: _____

Date of Event: _____ Check One (1): Service
 Spiritual

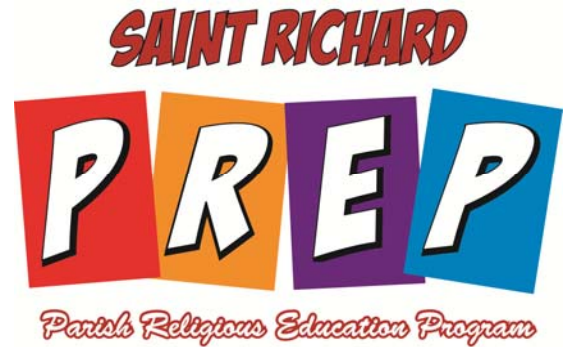


Family Participation Slip

Family Name: _____

Event: _____

Date of Event: _____ Check One (1): Service
 Spiritual



Family Participation Slip

Family Name: _____

Event: _____

Date of Event: _____ Check One (1): Service
 Spiritual

