

4th Day Workshop Registration Form

*****Please complete one form per person*****

Date: _____

Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Type: _____ Church: _____

The Weekend you made was:

Movement (DeColores, Emmaus, etc.) _____

Weekend Number: _____ Weekend Date: _____

City where attended: _____

Have you attended a 4th Day Workshop before? _____

If Yes, please give date and location: _____

Have you worked a DeColores Weekend? _____ How many? _____

What capacity? (Circle all that apply) **Rector/ess** **Co-Rector/ess** **Coordinator**
Cook **Cha** **Musician** **Auxillary** **Rollista** **Spiritual Director**

Outside team duties: _____

What capacity would you like to work? _____

If you were asked to give a Rollo (talk), which would you prefer? _____

Which Rollo(s) would you be most interested in working on in a group setting? (Mark your "top 3" in order of preference...1,2,3)

Ideal _____ Layman/woman _____ Piety _____ Study _____ Action _____

Leaders _____ Environment _____ CCIA _____

Are you in a Reunion Group? _____ If not, would you like to be? _____

Do you attend Ultreyas? (Circle) **Always** **Sometimes** **Seldom** **Never**

<p>RSVP to: Past President Couple Check website (www.nmdecolores.com) under "Board" tab for their contact information</p>	<p>***The Workshop fee is \$10 (payable when you sign in), which includes materials and lunch***</p>
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