

# Knights of Columbus – Orange County Chapter

## Day of Sharing – April 15, 2023

### Registration Form

Facility or Home or Organization or Family Name:

Check To Be Added To Our Mailing List

Address

City

Zip

Facility / Home / Organization Phone #

Email:

Point of Contact Name

Point of Contact Phone #

Point of Contact Alternate Phone #

Point of Contact Email:

Guests' Names - Attending (Please Print Clearly)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Caretaker Names - Attending

Attending Caretaker - Cell Phone

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

We will be taking pictures of this event and using those pictures to promote this event and the Knights of Columbus and our support of people with Intellectual Disabilities. Signing this form is your approval of this.

Approving Authority

Printed Name:

Signature:

Date:

**EMAIL or FAX Form to:**

Dan Kane – Day of Sharing Registration Contact: Phone: 206-954-3570; Email: dan0043@gmail.com; Fax: 888-979-9114