

Name \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**Locations: I would like to be in (circle all that apply):**

**Participants and leaders**

**Leaders and potential leaders only**

A group that meets at church.  
 A group in, or near, my neighborhood.  
 I am willing to host a small community in my home but not lead.

I am a Returning leader.  
 I am/will be a New Leader.

**Please indicate your status circle statements which apply to you**

I will participate by supporting through prayer. I am a New Participant.

Returning Participant. I want to be placed in a new group.  
 I participated previously but cannot at this time .  
 I can help in the nursery, please call me..  
 I can assist in envelope stuffing/mailings; any general assignment or area of need.

**Day and Time Preferences (indicate 1<sup>st</sup> or second choice**

Please indicate your first and second choices for meeting times. We will try our best to accommodate your preferences.

Evening Sessions	Tues	Wed	Thursday	(Most sessions meet 7p – 8:30p)
Morning Session	Thursday	9:45am – 11:15am		

My second choice would be: \_\_\_\_\_ Limited childcare available Thursday morning. Reservations required We need volunteers!

**Name and age(s) of child(ren)** \_\_\_\_\_

## Pequeñas Comunidades de Fé Hispana

Nom-  
bre \_\_\_\_\_ Dirección \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Día de la semana (circula preferencia) Lunes Martes Miércoles Jueves Viernes Sábado Domingo

Hora Preferida \_\_\_\_\_ am \_\_\_\_\_ pm Parroquia a la que pertenece \_\_\_\_\_

Te gustaría ser facilitador de un grupo (circula preferencia) si n

Lugar de reunión (circula preferencia) SMM hogares

### Por mas informacion

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**Please Print Clearly**

**It really makes a  
difference.**

**Return to RE office**

**Kathy Huey**