**Registration form.**

Parish....................................................................

Bride’s Name........................................................

Bridegroom’s Name....................................................................

Contact Address........................................................................................................................................................................................................................................................................................................

Telephone Number..............................................

Please tick the box next to the course you are attending:-

* Course One.
* Course Two.
* Course Three.

**Please return the completed registration form to Fr. Glover at the address overleaf or telephone the contact number for each course.**

**Please return the completed registration form to:-** Fr. Glover at St. Anne’s Presbytery, Crescent Road, Crumpsall, Manchester, M8 5UE. 0r by e-mail david.glover@dioceseofsalford.org.uk

**Contact telephone numbers:-**

**Courses based at Mount Carmel,**

Fr. Glover 0161 740 2448.

Damian and Patty Ganley 0161 740 0380.

**Course based at Failsworth:-**

Mike and Shirley Bridgen 0161 682 7233.

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