

St. Padre Pio Institute of Rochester, Inc.

"To my Spiritual Children, my prayers for you will never be lacking."

Founded September 2005

MEMBERSHIP FORM

I, the undersigned, hereby apply for membership in the **St. Padre Pio Institute of Rochester, Inc.**, and agree to help fulfill the religious purpose for which the corporation was formed.

I desire the following: (please circle your choice)

ONE YEAR SINGLE MEMBERSHIP - \$25.00

ONE YEAR FAMILY MEMBERSHIP - \$35.00

Membership entitles you to participate in all St. Padre Pio Chapel activities, including any special events sponsored or held by the organization, a membership card, lapel pin and a special recognition at our St. Padre Pio Celebration Masses.

Name (print last, first, m) _____

Family Member (print last, first, m) _____

Home Address _____

City, State and Zip Code _____

Home Phone _____

Business Phone _____

E – Mail Address _____

Dated

Applicant's Signature

Volunteer to help on activities yes _____ no _____

Please forward completed application and check made payable to St. Padre Pio Institute of Rochester, New York Inc.
(501c3 non-profit organization)

141 Frank DiMino Way • Rochester, New York • 14624

www.stpadrepiochapel.com

