

2023 MCWC Mail-In Registration Form

Please print clearly. Must be postmarked by April 10.



Name _____

Parish (name, city) _____

Phone _____

Mailing Address _____

Email Address (optional) _____

Dietary or Accessibility Concerns (if any) _____

Volunteer Interest ___ assist during event
(check all that apply) ___ member 2023 Conference Team (1-2hrs/month)

Registration Fee: \$85

Donation to help others attend (optional)

___ \$85
___ Other \$ _____

Total Payment \$ _____

Mail form and check to:

Diocese of Portland - OLFF
Attn: Women's Conference
510 Ocean Ave
Portland ME 04103

Please make check payable to:
Diocese of Portland