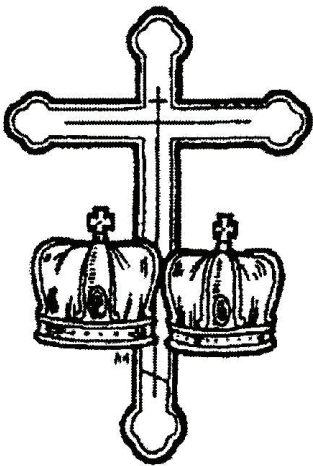


BYZANTINE CATHOLIC ARCHEPARCHY OF PITTSBURGH

**Pre-Cana Registration Form**

Print, complete and mail this form along with a \$125 check payable to "Office of Religious Education." (Breakdown of fees: Couple pays \$125; Parish pays matching fee of \$125; ORE covers all additional expenses). This form must be completed and signed by the officiating priest and submitted to the Office of Religious Education at least one month prior to the scheduled program. Pre-Cana Programs are held one time each year in the Spring at:

The Cathedral of St. John the Baptist,  
210 Greentree Road Munhall, PA 15120



Send to:  
Office of Religious Education  
3605 Perrysville Avenue  
Pittsburgh, PA, 15214

BRIDE

GROOM

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age Group: 20 \_\_\_ 21-25 \_\_\_ 26-30 \_\_\_  
(check one) 31-45 \_\_\_ 46+ \_\_\_

20 \_\_\_ 21-25 \_\_\_ 26-30 \_\_\_  
31-45 \_\_\_ 46+ \_\_\_

Religious  
Denomination: \_\_\_\_\_  
Church: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THIS SECTION MUST BE COMPLETED AND SIGNED BY THE PASTOR.**

First Marriage: Yes \_\_\_ No \_\_\_  
Wedding Date: \_\_\_\_\_  
Church responsible  
for paying the  
\$125 marching fee: \_\_\_\_\_  
Pastors Name: \_\_\_\_\_  
Pastors Signature: \_\_\_\_\_

Yes \_\_\_ No \_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You will receive confirmation prior to the Pre-Cana Program.  
For more information call the Office at 412/322-8773.