

QUINCEAÑERA REQUEST FORM



Church of the Messiah

DATE OF APPLICATION: _____ DATE/TIME OF QUINCEAÑERA: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

NAME OF QUINCEAÑERA: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL ADDRESS: _____ CELL PHONE #: _____

NAME OF PARENT/GUARDIAN # 1: _____

CELL PHONE #: _____

NAME OF PARENT/GUARDIAN # 2: _____

CELL PHONE #: _____

APPROX ATTENDANCE: _____ HOLY COMMUNION: _____ MUSIC (Optional): _____

DAMAS:

CHAMBERLAINS:

1 _____

1 _____

2 _____

2 _____

3 _____

3 _____

4 _____

4 _____

5 _____

5 _____

6 _____

6 _____

PLEDGIN MEMBER (\$350)

Contribution to help cover expenses: \$150

Musician Contract: \$200

NON-PLEDGING MEMBER (\$550)

Basic Fee: \$300

Custodian & Cleaning Fees: \$50

Musician Contract: \$200

APPROVED / CONFIRMED BY: _____ DATE: _____

Please return form to Norma Guerra, Director of Operations and Programs