



# Order of Franciscans of the Eucharist

*Abbey of Saint Mary Theotokos*

## Membership Application

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

Single: \_\_\_\_\_ Married: \_\_\_\_\_ Separated: \_\_\_\_\_ Divorced: \_\_\_\_\_ Widowed: \_\_\_\_\_

Membership Category: \_\_\_\_\_ Married Roman Catholic Priest \_\_\_\_\_ Brother

### **Roman Catholic Ordination Status:**

**Deacon:** Ordination Date: \_\_\_\_\_ Bishop: \_\_\_\_\_

Ordaining Arch/Diocese/Religious Order: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Priest:** Ordination Date: \_\_\_\_\_ Bishop: \_\_\_\_\_

Ordaining Arch/Diocese/Religious Order: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Education:**

Degrees

1. Institution: \_\_\_\_\_ Degree: \_\_\_\_\_ Date: \_\_\_\_\_

2. Institution: \_\_\_\_\_ Degree: \_\_\_\_\_ Date: \_\_\_\_\_

3. Institution: \_\_\_\_\_ Degree: \_\_\_\_\_ Date: \_\_\_\_\_

**Promise (initial):**

\_\_\_\_\_ I promise to live the Franciscan "Rule of Life" of the Order and to assist the Order to accomplish its mission and goals for Married Roman Catholic priests.

**Declaration (initial):**

\_\_\_\_\_ I declare that the above information is correct and accurate.

**Authorization (initial):**

\_\_\_\_\_ I authorize the Order of Franciscans of the Eucharist to verify any information listed above or in a background check, as may be the case.

**Disclaimer (initial):**

\_\_\_\_\_ The Order of Franciscans of the Eucharist and does not assume any legal and financial responsibility for its members.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Email OFE Completed Membership Application To:**

[Info@FranciscansEucharist.org](mailto:Info@FranciscansEucharist.org)

This Space For Board Use Only:

Date Application Received: \_\_\_\_\_

Brother Name: \_\_\_\_\_

Abbey or Friary Name: \_\_\_\_\_

ID Number: \_\_\_\_\_

Date Board Approved: \_\_\_\_\_