



Order of Franciscans of the Eucharist Secular

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: _____ Roman Catholic Laity _____ Wife of OFE Priest

Wife of OFE Priest:

OFE Husband First Name _____ MI: _____ Last Name: _____

Roman Catholic Laity:

Name of Roman Catholic Parish: _____

Name of Archdiocese or Diocese: _____

Address: _____

City: _____ State: _____ Zip: _____ Country _____

Phone: _____ Web: _____

Education:

Degrees Earned:

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 Secular to verify any information listed above.

Disclaimer (initial):

_____ I understand that the Order of Franciscans of the Eucharist and Order of Franciscans of the Eucharist Secular does not assume any legal responsibility for its members.

Signature of Applicant: _____

Print Name: _____

Date: _____

Email OFES Completed Membership Application To:

Info@FranciscansEucharist.org

This Space For Board Use Only:

Date Application Received: _____

Religious Name: ____ Yes: ____ No: Name: _____

ID Number: _____

Date Board Approved: _____