
**ENROLLMENT FORM INTO THE CONFRATERNITY OF
PRIEST ADORERS OF THE EUCHARISTIC FACE OF JESUS**
(For a Associate Adorer, Religious or Lay)

Please fill in the form, front & back, and send us the form by normal post.

TITLE: MR. / MRS. / MISS / BROTHER / SISTER / OTHER: _____

SURNAME: _____ FIRST NAME: _____

BIRTH (DD/MM/YYYY): ___ / ___ / _____ EMAIL: _____

POSTAL ADDRESS: _____

CITY: _____ STATE/PROVINCE: _____

POSTAL CODE: _____ COUNTRY: _____

RELIGIOUS: PROFESSION OR CLOTHING DATE (DD/MM/YYYY): ___ / ___ / _____

DIOCESE/ORDER: _____

*Inscription for Associate Adorers of the
Eucharistic Face of Jesus*

I _____, hereby ask to be inscribed as an Associate Adorer of the CONFRATERNITY OF PRIEST ADORERS OF THE EUCHARISTIC FACE OF JESUS, and solemnly pledge to make daily one continuous hour of adoration of the Most Blessed Sacrament. I entrust this resolution to the Blessed Virgin Mary, Mother of Priests and to the holy patrons of the Confraternity on whose constant intercession, before the throne of God and of the Lamb, I rely for help.



SIGNATURE: _____ **DATE:** _____

The newly-inscribed member will receive from Silverstream Priory a certificate of membership together with the prayers of the Confraternity.