



# BASIC CHRISTIAN COMMUNITY OF HAWAII

## APPLICATION AND PAYMENT FORM

NAME: \_\_\_\_\_ LIKE TO BE CALLED: \_\_\_\_\_

PHONE: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
Street or P.O. Box City, State Zip Code

E-MAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ GENDER: ( ) Female ( ) Male

RELIGION: \_\_\_\_\_ CHURCH: \_\_\_\_\_

Do you require special attention such as diet or health: [ ] Yes [ ] No

If yes, please explain: \_\_\_\_\_

IN CASE OF EMERGENCY, WHOM DO WE NOTIFY:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_ Medical Plan: \_\_\_\_\_

A donation of \$100.00 is requested to defray the cost of all meals, snack, writing materials, room and board. If there is difficulty in paying in full, arrangements can be made to pay in installments, or contact your sponsor or retreat directors. We don't want to turn anyone away.

*I understand that according to the Roman Catholic Church, receiving Communion is linked with being in communion with the Pope and pastors of the Church. Those who receive Holy Communion at a Catholic Mass not only receive the Body and Blood of Jesus Christ but also publicly express their unity with the pastors of the Roman Catholic Church. Therefore, Catholic sacramental communion is only open to those who believe that the Eucharist is the Body and Blood of the Lord and who are in unity with the pastors of the Catholic Church.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please make check payable to: **Basic Christian Community of Hawaii**

Submit your application with payment to your sponsor or mail to:

Dcn Raul Perez (Phone: (808) 256-9000)

91-1012 Hoea St.

Kapolei, HI 96707

or mail to: **raul.perez808@gmail.com**

*Confirmation letter or phone call will be made to you upon receipt of application.*