



Friends of the Missionaries of the Holy Family

Application Form

Candidates apply in writing to the Provincial using this form. The applicant must be a Catholic in good standing and the application form must be signed by a priest, brother or deacon. The applicant must also sign that he or she promises to abide by the guidelines of the Association.

Name _____

Street Address _____

City, State, Zip _____

Phone Number _____

I request to be enrolled as a member of “**The Friends of the Missionaries of the Holy Family.**” I further promise to abide by the Philosophy and Purpose of the Association. This commitment is made for a period of two years, at which time I may renew my provisional membership or become a permanent member.

Candidate Signature _____

Candidate – Printed Name _____

Witness Signature _____ (Priest, Deacon, Brother)

Date _____

Mail this completed application to:

**Friends of the Missionaries of the Holy Family
3014 Oregon Avenue
Saint Louis, Missouri, 63118**