

LENTEN PILGRIMAGE 2012



REGISTRATION FORM

Participant No. _____ (to be filled up by LSPO staff)

Name: _____
(Surname) (First Name) (Middle Initial)

Nickname: _____ College / Department: _____

ID Number: _____ Gender: _____

Email Address: _____

Landline: _____ Mobile Number: _____

Contact number in case of emergency: _____

Contact Person: _____

Religion: _____

Please check (✓) CAP ___ ASF ___ ASP ___ Faculty ___ Student ___

DLSU Lenten Pilgrimage that you attended: 2009 ___ 2010 ___ 2011 ___

For Undergraduate Students Only:

Name of Parents:

(Mother) _____

(Father) _____

Home Address: _____

Contact number(s) of parents _____

Print and submit this form to LSPO at SJ101 on or before February 24, 2012.