

**Please Print a copy of this registration form, fill it out and mail this along with your non-refundable deposit check of \$75 (made payable to NH Catholic Engaged Encounter) to our registration couple - Tom & Janice Lachance - 50 McQuestion Rd., Merrimack, NH 03054**  
**FOR ALL OTHER INFORMATION – You can reach Tom & Janice at 603-424-2856 or [lachancet@aol.com](mailto:lachancet@aol.com)**

His Name \_\_\_\_\_ Age \_\_\_\_\_

Her Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

City, State, Zip \_\_\_\_\_

( ) \_\_\_\_\_  
His Phone \_\_\_\_\_ Date Engaged \_\_\_\_\_

( ) \_\_\_\_\_  
Her Phone \_\_\_\_\_ Wedding Date \_\_\_\_\_

e-mail address \_\_\_\_\_

e-mail address \_\_\_\_\_

Name of Priest \_\_\_\_\_

Name of Parish \_\_\_\_\_

Religion \_\_\_\_\_

Religion \_\_\_\_\_

Special Needs, if any \_\_\_\_\_

Weekend Date: 1st Choice \_\_\_\_\_

Weekend Date: 2nd Choice \_\_\_\_\_