

REGISTRATION FORM

EXPLORER DAY Saturday, November 23, 2024 8:30 am to 3:30 pm

**(\*Please Note- Sponsoring Priest signature must be present before submitting this form)**

EMAIL to: cmaglalang@sdcatholic.org

MAIL to: Vocation Director

Office for Priestly Vocations

1667 Santa Paula Drive

San Diego, CA 92111

First & Last Name *(****Please print clearly – All fields)***

Address City Zip

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Daytime Phone |  |  | Mobile Phone |
|  |  |  |  |
| E-Mail |  |  | Age & Date of Birth  ***(Must be at least 17)*** |
|  |  |  |  |
| Highest Level of School Completed |  |  | Occupation |

Parish or Faith Community

Sponsoring Priest

**\*Sponsoring Priest’s Signature *(Required before submittal)***

***Please return to St. Francis Center by Monday, November 18, 2024***