

Saint William Parish - Adoration Chapel

I, *(full name)* _____

(address) _____

(tel.) _____ *(email)* _____, promise to take time to visit the Lord in the Blessed Sacrament.

I plan to be in the chapel on *(day)* _____ *(from)* _____ *(until)* _____.

(day) _____ *(from)* _____ *(until)* _____.

(day) _____ *(from)* _____ *(until)* _____.

Signature: _____

Today's Date: _____ ***Office Use Initials:*** _____.

Please return this completed form to the Rectory office or email it to office@churchofstwilliam.com.