MALANKARA ORTHODOX SYRIAN CHURCH DIOCESE OF SOUTH-WEST AMERICA



MAR GREGORIOS ORTHODOX CHRISTIAN STUDENT MOVEMENT



UNIT REGISTRATION 2017

Unit Name (Church Name)					
Location (City and State)			Number of Active Members *		
Parish Priest's Name			E-mail Address		
Parish Priest's Signature			Phone Number		
MGOCSM Parish Representative's Name			E-mail Address		
Phone Number (Cell)		Phone Numb	Phone Number (Home)		
MGOCSM Area Council Member's Name			E-mail Address		
Phone Number (Cell)		Phone Nu	mber (Home)		
Please make (\$ 100.00) checks payable to "Diocese of South-West America (MGOCSM)" and mail with form to: Ms. Sophy Cherian c/o DS-WA MGOCSM 4123 Lake Vista Circle, Missouri City, TX 77459			*Active member: A member receiving Holy Communion in the parish between the ages of 13-24, who has attended at least one MGOCSM event in the last 6 months.		
ALL FORMS A	ND CHECKS ARE DU ONLY Registered Units are			· · · · · · · · · · · · · · · · · · ·	
OFFICE USE ONLY:					
Date Received:	Check #	Receipt #		Date Confirmed:	