

UUC Covenant Groups – Registration

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email Address: _____

_____ Regular participant at UUC since _____

_____ Member of UUC since _____

Please mark your other needs:

_____ Childcare _____ Young Adult/Medians _____ Handicap access

_____ Need a group close to home -OR- _____ Willing/able to travel

_____ Need an afternoon group as I don't drive at night

_____ GLBT group

Days that you **CAN** attend a group:

_____ Mondays

Young Adults/Medians:

_____ Tuesdays

_____ Sundays -OR- _____ Saturdays

_____ Wednesdays

Senior ladies:

_____ Thursdays

_____ Tuesday Afternoons

**PLEASE PRINT THIS FORM,
THEN FILL IT OUT AND PUT IT IN THE COVENANT GROUP MAILBOX AT UUC
OR MAIL IT TO...**

*Tiffany Boggs
140 89th Ave.
Treasure Island, FL 33706*