

Dear Engaged Couple—

The Catholic Church requires those marrying in the church to attend a marriage preparation class. **Sacred Promises** -- which is an all day Saturday retreat held at St. Francis Church twice a year, in the spring and again in the fall-- fulfills this Diocesan requirement.

**Sacred Promises** is lead by Fr. Craig and several married couples from our parish. You and your fiancé will have an opportunity to set aside wedding plans for a day and to instead use this special day to plan for your life together as husband and wife.

The retreat 2009-2010 dates are scheduled as follows:

March 28, 2009

March 20, 2010

October 3, 2009

October 2, 2010

The class runs from 7:30am to approximately 9:00pm. Attendance for the entire day is mandated. All meals and materials are included. The fee is \$175.00 per couple and includes a non-refundable \$50.00 deposit at the time of registration. Space is limited to 30 couples.

To register, complete the attached registration form, enclose either payment of the \$50.00 non-refundable deposit or the entire balance, payable to **St. Francis Church Sacred Promises**, and return to St. Francis Church, c/o Sacred Promises, 900 H St., Bakersfield, CA, 93304. The balance of unpaid fees must be paid one month prior to retreat date. For planning purposes and for the courtesy of those on the waiting list, failure to submit any outstanding balance will result in your name being removed from the list.

Please contact Stacy Clarksean at 661.599.1536 with any questions.

# SACRED PROMISES

## Registration Form

Today's Date \_\_\_\_\_

Retreat Date \_\_\_\_\_

### COMPLETE AND MAIL TO:

Sacred Promises Weekend  
Attn: Stella Garcia  
900 H St.  
Bakersfield, CA 93304-1312

**Please Clearly Print your Name as you wish it to appear on your Name Tag**

GROOM'S NAME: \_\_\_\_\_ Age \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

**PHONE:** Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PARISH: \_\_\_\_\_

RELIGION: \_\_\_\_\_

PREVIOUSLY MARRIED: YES \_\_\_ NO \_\_\_

**Please Clearly Print your Name as you wish it to appear on your Name Tag**

BRIDE'S NAME: \_\_\_\_\_ Age \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

**PHONE:** Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PARISH: \_\_\_\_\_

RELIGION: \_\_\_\_\_

PREVIOUSLY MARRIED: YES \_\_\_ NO \_\_\_

WEDDING DATE: \_\_\_\_\_

CHURCH WHERE WEDDING WILL BE HELD: \_\_\_\_\_

**BREAKFAST IS PROVIDED** - Our program will start on Saturday at 7:30 a.m. & end at approximately 9:00 p.m.

**THE FEE FOR THE WEEKEND IS \$175.00 PER COUPLE**

**\$50.00 NON-REFUNDABLE DEPOSIT MUST BE SUBMITTED WITH THIS REGISTRATION FORM**

\_\_\_\_ \$50 Deposit

**St. Francis Church**  
Faith, Family & Friends

\_\_\_\_ Enclose Amount \$ \_\_\_\_\_

Failure to submit remaining balance (1) month before retreat date, may result in forfeiting your space.

Please make checks payable to: [St. Francis Church – Sacred Promises](#)