



Centro Internazionale Gruppi di Preghiera di San Pio da Pietrelcina

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REGISTRATION FOR A NEW PADRE PIO PRAYER GROUP

Date.....

Nation

Town **Diocese**

Name of the Group

Church where the prayer meetings are held

Address **Tel**

Time-table of the meetings (day & hour)

Number of participants

Spiritual Director's name

Address **Town**

Tel **Cell** **Email**

Group Leader's name

Address **Town**

Tel **Cell** **Email**

Vice Group Leader's name

Address **Town**

Tel **Cell** **Email**

Secretary's name

Address **Town**

Tel **Cell** **Email**

SIGNATURE Spiritual Director

SIGNATURE Group Leader

APPROVAL of the Diocesan Ordinary or his delegate

