

## SACRED HEART GUILD OF OUR LADY

## 2022/2023 MEMBERSHIP DUES RECEIPT FORM

(Please Print)

Name:			
Address: _			
City:		_ State: _	
ZIP:		_	
Dues Amt. Paid: \$ Cash Check			
Check Num	ber:		
Signature:			
Received by	y:		
Date:			

**Note:** Place this form with your check or cash into a sealed envelope in the collection basket at one of the weekend Masses. You may also mail or turn it into the church office in a sealed envelope clearly marked Guild of Our Lady.