



Church of the Visitation

655 Sunnydale Avenue, San Francisco, CA 94134-2884

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www.visitacionchurch.org

QUINCEANERA REGISTRATION

INFORMATION:

Name of Quinceañera: _____

Date of Birth: _____ Place of Birth: _____

Date / Place of Baptism: _____

Date / Place of First Communion: _____

Date / Place of Confirmation: _____

FAMILY INFORMATION:

Father's Name: _____

Mother's Name: _____

Address: _____

Telephone: _____ Registered in the Parish: Yes___ No___

PREPARATION:

Date of Quinceañera: _____ Time: _____

Language: _____ Celebrant: _____

Date of Rehearsal in Church: _____ Time: _____

FEES:

The donation for the Quinceañera Celebration is \$500.00 which includes the Rehearsal fee. A non-refundable deposit of at least \$200.00 must be made upon calendaring of the date. The remaining balance should be paid at least two weeks before the celebration.

Signature: _____

Date: _____