**DIOCESE**

**OF**

**LAREDO**



**ANNUAL ROMAN**

**CATHOLIC CHURCH**

**25th OR 50th**

**WEDDING ANNIVERSARY**

**MASS**

***MISA ANUAL***

***DE CELEBRACION***

***DE 25 Y 50 AÑOS***

***DE MATRIMONIO***

***CATOLICO ROMANO***

**C:\Documents and Settings\MMiller.PASTORALCENTER\Local Settings\Temporary Internet Files\Content.IE5\CIIZYAI8\MC900129382[1].wmf**

**Location of the Mass:**

**San Agustin Cathedral**

**201 San Agustin Avenue**

**Laredo, Texas 78040**

**Date of the Mass:**

**Saturday,**

**February 10th, 2024**

**At 11:00 AM**

***Lugar de la Misa:***

***Catedral San Agustín***

***Ave. San Agustín #201***

***Laredo, Texas 78040***

***Sábado***

***10 de febrero, 2024***

***11:00 AM***

**For Information Contact:**

**Diocese of Laredo**

**Family Life Office**

**Tel. (956) 727-2140**

***Send this registration form to:***

***mmiller@dioceseoflaredo.org***

***Para solicitar más información***

***contacte a la***

***Oficina del Ministerio a la Familia***

***De la Diócesis de Laredo***

***Tel. (956) 727-2140***

***Favor the enviar esta forma de inscripción completa a:***

[***mmiller@dioceseoflaredo.org***](mailto:mmiller@dioceseoflaredo.org)

**REGISTRATION FORM**

Names/ Nombres:

(His */ de El)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Hers /de Ella )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street / *Domicilio* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/ *Ciudad\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State /*Estado* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code / *Código Postal*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone / *Teléfono* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of your Parish / *Nombre de su Parroquia:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of your **Roman Catholic Wedding**:

*Fecha de su* ***Matrimonio Sacramental****:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish of your Roman Catholic Wedding:

*Iglesia donde se efectuó su Matrimonio:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Circle your anniversary/ Indique

*¿Cuál es su aniversario de bodas?*

**SILVER / *PLATA* 25 years / años**

**GOLD / *ORO* 50 years / años**

**Family Life Office**

**Diocese of Laredo Pastoral Center**

**1201 Corpus Christi Street, Laredo, Texas 78040**

**Send this form by January 26th, 2024**

***Envie esta forma antes del 26 de enero, 2024***