



Touchstone Family Association
Strengthening Family • Building Community



點石家庭協會

GROUP REGISTRATION FORM (小組註冊表)

Name (姓名) _____ (英文)

_____ (中文)

Sex (性別) _____ D.O.B. (出生日期) _____

Contact Address (聯絡地址) _____

_____ Postal Code (郵區編碼) _____

Contact phone number (聯絡電話) _____

(手提電話/傳真號碼) _____

Goals of joining the Group (參加小組想達到的目標)

Where do you hear from this group/refer to join in this Group?

何處轉介你參加這個小組?

Signature (簽署) _____ Date (日期) _____

**By typing my name, I give my Informed Consent to this fillable document.*