



# The Monthly Commemorative Celebration Enrollment Form

Please print or type all information.

**Card(s) Needed:**  yes  no

Cards are available at the Main Office of Our Lady of the Sacred Heart High School.

If you need a card, please select:

Sympathy

Thinking of You

All Occasion



Please enroll \_\_\_\_\_ in the MCC Program for

the month of \_\_\_\_\_  Living\*  Deceased

Intention:  In Sympathy  In Memory  In Loving Memory  Thinking of You  
 Other \_\_\_\_\_

My Name \_\_\_\_\_ Date \_\_\_\_\_

My Address \_\_\_\_\_

My Phone Number(s) \_\_\_\_\_

**ENCLOSED IS MY TAX DEDUCTIBLE CONTRIBUTION TO THE SCHOOL:**  \$10  \$25  \$25  
 \$\_\_\_\_\_ other  Donation made via The OLSH Fund

Please make checks payable to: *OLSH*

*This form and donation may be dropped off at the school or mailed to:*

Our Lady of the Sacred Heart High School

MCC Committee

1504 Woodcrest Avenue

Coraopolis, PA 15108-3054

*Thank you for your generosity and participation!*