## BENEDICTINE ABBEY OF CHRIST IN THE DESERT Abiquiu, New Mexico

## **Perpetual Enrollment Form**

I would like to enroll the following individual, family, parish, religious community, company or otherwise, in the *Perpetual Enrollment* program.

Name: \_\_\_\_\_

The Certificate of Enrollment and Explanation of Images to be mailed to:

Name:	 	 	
Address:	 	 	

City and State:\_\_\_\_\_

Zip Code & Country: \_\_\_\_\_

The Donor of the Enrollment is:

Name and Address: \_\_\_\_\_

Checks payable to Monastery of Christ in the Desert. Mailed to: Perpetual Enrollment Program c/o Monastery of Christ in the Desert P.O. Box 270 Abiquiu, N.M. 87510-0270, U.S.A. Use my Credit Card: type (Master Card or Visa) Credit Card No: \_\_\_\_\_\_\_ Expires \_\_\_\_\_\_ Name on card: \_\_\_\_\_\_