

# ST. MARGARET PARISH ~ 600 Club - April 10, 2026

**THIS FORM MUST BE FILLED OUT AND RETURNED**

**WITH YOUR PAYMENT to**

St. Margaret Parish ~ 141 N. Hickory Ave. Bel Air, MD 21014 OR  
drop it off at the parish office at your convenience.

Maximum of 5 people on a ticket

PLEASE INCLUDE NAME, ADDRESS, EMAIL and PHONE NUMBER  
OF EACH PERSON ON THE TICKET.

**\*PLEASE INDICATE BELOW THREE (3) POSSIBLE NUMBERS  
THAT YOU WOULD LIKE.\***

**\*Numbers:** \_\_\_\_\_

1. Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

4. Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

5. Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

## Office Use Only

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

Email: \_\_\_\_\_

Payment Date \_\_\_\_\_ Amount Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ GiveCentral \_\_\_\_\_

Mailed: \_\_\_\_\_ Picked Up: \_\_\_\_\_