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***Centro de los Grupos de Oraçion del Padre Pio***

Viale Cappuccini, 172 – 71013 San Giovanni Rotondo FG – Italy

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**CERTIFICADO ACTUALIZADO DEL GRUPO DE ORACION**

|  |  |
| --- | --- |
| AÑO |  |

CAMBIOS DESDE EL AÑO ANTERIOR SI NO

|  |  |
| --- | --- |
| *Fecha* |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *País* | |  | | | | | | | | | |
| *Ciudad* | |  | | | | | *Diócesis* | |  | | |
| *Nombre del Grupo de Oración* | | | |  | | | | | | | | |
| *Iglesia en donde tienen lugar las funciones* | | | | | |  | | | | | | |
| *Dirección* | | |  | | | | | *Tel* | |  | | |
| *Fechas y horarios de las funciones* | | | | |  | | | | | | | |

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| ***Director Espiritual*** | | |  | | | | | | |
| *Dirección* |  | | | | *Ciudad* |  | | | |
| *Tel* |  | | *Cell* |  | | | *E-mail* |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Jefe del Grupo*** | | |  | | | | | | |
| *Dirección* |  | | | | *Ciudad* |  | | | |
| *Tel* |  | | *Cell* |  | | | *E-mail* |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Vice - Jefe del Grupo*** | |  | | | | | | |
| *Dirección* |  | | | | *Ciudad* |  | | | |
| *Tel* |  | | *Cell* |  | | | *E-mail* |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Secretario*** | |  | | | | | | |
| *Dirección* |  | | | | *Ciudad* |  | | |
| *Tel* |  | | *Cell* |  | | | *E-mail* |  |

**FIRMA del Director Espiritual**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FIRMA Jefe del Grupo**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APROBACIÓN del Ordinario Diocesano o de un delegado de Usted** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

solo si las variaciones concernen el Asistente Espiritual y el Animador