

# Registration Form

## Christian Bio-Ethics

Please complete the entire form

2024/2025

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Prefix: \_\_\_\_\_  
Ms. Mrs. Mr.

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

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

Parish: \_\_\_\_\_

**This class will be offered at Holy Name Parish, Ebensburg**  
**Facilitator: Fr. James Crookston**  
**Tuesdays: 6:30-9:00 PM**  
**March 4, 11, 18, 25; April 1, 8, 22**

**Registration Fee: \$35**  
**Required books for class**  
**(A Catechism for Health Care-Paperback and book can be purchased on Amazon)**  
**16 Hours Continuing Education Hours**  
**For any questions please contact the Office of Lay Ministry at (814) 361-2000**

I am taking the course for: Adult Enrichment \_\_\_\_\_ Lay Ecclesial Ministry \_\_\_\_\_ Other \_\_\_\_\_

Payment Enclosed: \$ \_\_\_\_\_

Please make checks payable to *Diocese of Altoona-Johnstown*  
 Send completed registration form and payment to:

**Adult Enrichment and Lay Ecclesial Ministries**  
**609 Park Avenue**  
**Johnstown, PA 15902**

*Thank-You!*