

Registration Form

Christian Prayer and Spirituality

Please complete the entire form

2016/2017

Last Name: _____ First Name: _____ Prefix: _____
Ms. Mrs. Mr.

Street: _____ City: _____ Zip: _____

Home Phone: _____ Other Phone: _____

Email: _____

Parish: _____

Location: St. Patrick School Building, Johnstown
Facilitator: Deacon Michael Russo
Tuesdays: 6:30-8:30 PM
March 7, 14, 21, 28; April 4, 11, 18, 25

~or~

Location: St. Catherine of Siena, Duncansville
Facilitator: Sr. Marilyn Welch, CCW
Wednesdays: 6:30-8:30 PM
March 8, 15, 22, 29; April 5, 12, 19, 25

Registration Fee: \$35
Book Cost: \$20

I am taking the course for: Adult Enrichment _____ Lay Ecclesial Ministry _____

Location Choice: Johnstown _____ Duncansville _____

Payment Enclosed: \$ _____

Please make checks payable to *Diocese of Altoona-Johnstown*

Send completed registration form and payment to:

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

Thank-You!