

Registration Form

New Testament

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: Msgr. Michael Becker

Thursdays: 6:30-9:00 PM (6 weeks, 2 1/2 hrs class)

Sept. 1, 8, 15, 22, 29; Oct. 6

~or~

Location: St. Joseph Friary, Hollidaysburg

Facilitator: Fr. Christopher Panagoplos, TOR

Thursdays: 6:30-8:30 PM (8 weeks)

September 1, 8, 15, 22; Oct. 6, 13, 20, 27

Registration Fee: \$35

Book Cost: \$30

(Catholic Study Bible)

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

Location Choice: Johnstown _____ Hollidaysburg _____

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!