

Registration Form

Church History

Please complete the entire form

2017/2018

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

Street: _____ City: _____ Zip: _____

Home Phone: _____ Other Phone: _____

Email: _____

Parish: _____

Location: St. John Vianney, Mundy's Corner
Facilitator: Deacon Thomas Buige
Tuesdays: 6:30-8:30 PM (10 weeks)
March 6, 13, 20, 27; April 3, 10, 17, 24; May 1, 8

~or~

Location: St. Catherine of Siena, Duncansville
Facilitator: Mr. Donald Gibboney
Tuesdays: 6:30-8:30 PM (10 weeks)
March 6, 13, 20, 27; April 3, 10, 17, 24; May 1, 8

Registration Fee: \$45
Book Fee - \$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!