

# Registration Form

## Living Your Strengths

*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: Family Life Office, Lilly**  
**Facilitator: Msgr. Michael Becker**  
**Thursdays: 6:30-8:30 PM (7 weeks)**  
**January 18, 25; February 1, 8, 15, 22; March 1**  
**Cost - \$70**  
*(Includes Registration and Materials)*

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

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!*