

# Registration Form

## Sacraments

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. Michael Church Hall, St. Michael**  
**Facilitator: Rev. D. Timothy Grimme**  
**Tuesdays: 6:30-8:30 PM**  
**January 9, 16, 23, 30; February 6, 13, 20, 27 (Snow Date March 7)**  
*~or~*

**Location: Cathedral, Seton Suite, Altoona**  
**Facilitator: Msgr. Robert Mazur**  
**Mondays: 6:30-9:00 PM (6 weeks - 2 1/2 hrs)**  
**January 8, 15, 22, 29; February 5, 12**  
**Registration Fee: \$35**  
**Book Cost: \$30**

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

Location Choice: St. Michael \_\_\_\_\_ Altoona \_\_\_\_\_

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!***