

# 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 5, 12, 19, 26; April 2, 9, 16, 23, 30; May 7**  
*~or~*

**Location: St. Catherine of Siena, Duncansville**  
**Facilitator: Deacon Donald Gibboney**  
**Tuesdays: 6:30-8:30 PM ( 10 weeks)**  
**March 5, 12, 19, 26; April 2, 9, 16, 23, 30; May 7**

**Registration Fee: \$45**  
**Material Fee - \$20**  
**20 Hours Continuing Education Hours**

I am taking the course for: Adult Enrichment \_\_\_\_\_ Lay Ecclesial Ministry \_\_\_\_\_  
Other \_\_\_\_\_ (please specify)

Location Choice: Mundy's Corner \_\_\_\_\_ 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!*