

# Registration Form

## Sacraments

Please complete the entire form

2018/2019

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 8, 15, 22, 29; February 5, 12, 19, 26 (March 5—Snow Make-Up Day)**

~or~

**Location: Cathedral, Seton Suite, Altoona**  
**Facilitator: Msgr. Robert Mazur**  
**Mondays: 6:30-9:00 PM (6 weeks - 2 1/2 hrs)**  
**January 7, 14, 21, 28; February 4, 11**

**Registration Fee: \$35**

**Book Cost: \$30**

**16 Hours Continuing Education Hours**

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

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!***