

# Registration Form

## New Testament

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. Patrick School Building, Johnstown**

**Facilitator: Msgr. Michael Becker**

**Thursdays: 6:30-9:00 PM (6 weeks, 2 1/2 hrs class)**

**September 6, 13, 20, 27; October 4, 11**

**~or~**

**Location: St. Joseph Friary, Hollidaysburg**

**Facilitator: Fr. Christopher Panagoplos, TOR**

**Thursdays: (7 weeks)**

**September 6, 13, 20 - 6:30-8:30 PM (2 hr classes)**

**September 27; October 18, 25 and November 1 - 6:30-9:00 PM (2 1/2 hr class)**

**Registration Fee: \$35**

**Book Cost: \$30**

**(Catholic Study Bible)**

**16 Hours Continuing Education Credit**

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

Location Choice: Johnstown \_\_\_\_\_ Hollidaysburg \_\_\_\_\_

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!**