

Registration Form

New Testament

Please complete the entire form

2019/2020

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 5, 12, 19, 26; October 3, 10

~or~

Location: Seton Suite-Cathedral, Altoona
Facilitator: Dr. James Merrick
Thursdays: (8weeks)
September 5, 12, 19, 26; October 3, 10, 17, 24

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!