

Registration Form

Heart of Faith

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: Holy Spirit - Rectory Office Building
3 Walnut Street, Lock Haven**

Facilitator: Fr. Joseph Orr and Fr. Michael Wolfe

Time: 6:00 - 8:00 PM

September 16 and 30 (Monday)

October 3 (Thursday), October 7 (Monday),

October 11 (Friday), October 14 (Monday),

October 18 (Friday), October 24 (Thursday)

Registration Fee: \$35

Book Cost: \$20

(United States Catholic Catechism for Adults)

I am taking the course for: Adult Enrichment _____ Lay Ecclesial Ministry _____

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!