Registration Form  
Trinity and Christology  
Dr. James Merrick

Please complete the entire form  
2019/2020

Last Name:________________________ First Name:________________________ Prefix:____________

Street:____________________________ City:______________________________ Zip:______________

Home Phone:______________________ Other Phone: ___________________________

Email: ________________________________________________________________________________

Parish:________________________________________________________________________________

Location:  
St. Rose of Lima, Rectory, Altoona

Time:  
Thursdays - 6:00-8:30 PM

Class Dates:  
March 5, 12, 19, 26
April 2 (no class April 9 Holy Week), 16, 23, 30
May 7, 14

Registration Fee: $45
Book Fee: $30

I am taking this course for (please check one):  
______________Adult Enrichment  
______________Continuing Education Hours  
______________Third Year Track

Basic Lay Ecclesial Ministry Certification: _____________(Y/N)
If yes, Year of Certification: __________________________

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!