

REGISTRATION FOR CATECHIST CERTIFICATION COURSE

Site Name: _____ Course Name: _____

Participant's Legal Name: _____ Phone: _____

Email: _____ Student ID#: _____

Last 4 SS # required for first time attendees

(Please mark one) Catechist Teacher Other Minister

Parish or School Name: _____

Registration Fee: \$40.00

Please make payments to the Archdiocese of Miami and return it with this registration form to the hosting parish.

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