

Holy Name's Women Catholic Scripture Study
Registration Form 2018-2019
THE GOSPEL OF LUKE

Name _____

Address _____

City/Zip _____

Phone _____

Email _____

Parish _____

Level of Bible Knowledge: ___Beginner ___Intermediate ___Advanced

You may request to be in small group with one individual, please specify her name

If you will be gone during the winter please specify which months

_____ through _____.

Fee \$35.00

Scholarships Available

Please specify Morning _____ or Evening _____ Class.

Please make checks payable to Holy Name (include WBS on memo line)

Mail to: Karen Aliber 3816 Newport Way Drive Waterford, MI 48329

Or submit to the Parish Office

Any questions please call Karen at 248-618-9285 or email - vette525@comcast.net