



STUDY REGISTRATION FORM

"THE BIBLE and the SACRAMENTS"

PARTICIPANT INFORMATION

Name: _____

Address: _____

City: _____

State, Zip: _____

Email: _____

REGISTRATION OPTIONS

Participant Fee: \$25.00

Donation to Scholarship Fund: _____

Total: _____

Cash Y/N? _____

Check Y/N? _____

Checks can be made payable
to: Immaculate Heart of Mary

To request financial assistance, please email Joe Buttle at paff@cni.net or call 360 423-3650

Special Needs: _____

Volunteer Opportunities: Small Group Facilitator Y/N? _____ Hospitality Y/N? _____

Other: _____

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Includes Student Workbook!

JourneyThroughScripture.com