

Acts

The Spread of the Kingdom



STUDY REGISTRATION FORM

Tuesday Mornings, 9:45 to 11:30 AM, Starting September 3

PARTICIPANT INFORMATION

Name: _____

Address: _____

City: _____

State, Zip: _____

Email: _____

REGISTRATION OPTIONS

Participant Fee: \$ 40.00

Donation to Scholarship Fund: _____

Total: _____

Cash Y/N? _____

Check Y/N? _____

Checks can be made payable to:

Saint Brigid Catholic Church

mailed to:

3400 Old Alabama Rd, Johns Creek GA 30022

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

Other: _____