



# The Institute for Catholic Studies and Formation

*Diocese of Venice in Florida*

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## COURSE REGISTRATION

*[For All Students]*

FALL\_\_\_\_\_ SPRING\_\_\_\_\_ SUMMER\_\_\_\_\_ 2016  
MASTERS\_\_\_\_\_ DIPLOMA\_\_\_\_\_ CERTIFICATE\_\_\_\_\_  
DEACON CANDIDATE\_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY\_\_\_\_\_ ZIPCODE\_\_\_\_\_

E-MAIL \_\_\_\_\_

HOME PHONE\_\_\_\_\_ CELL PHONE\_\_\_\_\_ WORK PHONE\_\_\_\_\_

PARISH \_\_\_\_\_



COURSE NUMBER	COURSE NAME	SECTION (V.1/V.2/V.3)	VIDEO CONF. LOCATION (e.g. St. Joseph Parish)
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**AUTHORIZATION:** \_\_\_\_\_

*Dr. Kathy L. Kleinlein, President*

\_\_\_Check or Money Order for \$25 made out to the Institute for Catholic Studies and Formation  
(Registration Fee)