



**CHRISTENDOM  
COLLEGE  
GRADUATE SCHOOL**

**Catechist Certification Program Registration**  
*Please Print Clearly!*

Please fill out and mail to: Christendom Graduate School, 4407 Sano St., Alexandria, VA 22312

Name \_\_\_\_\_ Home phone \_\_\_\_\_  
Address \_\_\_\_\_ Work phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_  
Parish/school & city \_\_\_\_\_

\_\_\_\_\_ I wish to register for **Catechist Formation, PART ONE** (cost: \$365). NOTE: all or part of this fee **MIGHT** be refundable by your parish or school if you are a teacher in a Catholic School of the Diocese of Peoria – please check with your pastor/principal).

\_\_\_\_\_ I wish to register for **Catechist Formation, PART TWO** (cost: \$365). NOTE: all or part of this fee **MIGHT** be refundable by your parish or school if you are a teacher in a Catholic School of the Diocese of Peoria – please check with your pastor/principal).

**PAYMENT INFORMATION:** \_\_\_\_\_ Check enclosed \_\_\_\_\_ Bill me \_\_\_\_\_ Bill my credit card:

Credit card # \_\_\_\_\_ Exp. date \_\_\_\_/\_\_\_\_ Code \_\_\_\_\_

Billing Address \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

\_\_\_\_\_  
Signature of Cardholder

\_\_\_\_\_  
Printed Name of Cardholder

\_\_\_\_\_  
Date

PLEASE NOTE: When paying by credit card, a 3% convenience fee will be added to the total amount due.

For more information, please call 703-658-4304. You will receive the access code for the course via email once your payment has been received and processed.

Thank you for choosing Christendom, and enjoy your course!