**Spiritual Formation Course Application Form**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **e-mail** |  |
| **‘phone** |  |
| **Place of worship/ Parish**  (if applicable) |  |
| **Preferred venue?**  **(please tick)** | St Michael’s, Budbroke 1.00pm – 3.00 pm  St John the Baptist, Berkswell 7.30 – 9.30 pm  Either |
| **Any access details you would like us to be aware of?**  **(**hearing, visual, mobility et al.) | |
| I understand that the course fee is £40 per term to be payable at the start of each term. | |
| **Signed**  (or sent from personal e-mail address) |  |

**Please return this form to Zoe Bell at St John the Baptist Parish Office, preferably by e-mail: bellzoe@hotmail.co.uk**