



ARCHDIOCESE OF BALTIMORE
DEPARTMENT OF EVANGELIZATION
PARISH/SCHOOL PAYMENT
REGISTRATION FORM
for pastoral leaders paying for courses
PLEASE TYPE OR PRINT CLEARLY

This form is only for those instances in which a Parish or School is paying for registration.
Once payment is received, the enrollment key will be sent to the participant to register in the online learning system.

Name _____

Street Address _____ Home Phone _____

City, State, Zip _____ Alt. Phone _____

Email _____

Parish or School _____ Area of Ministry _____

Highest Level of Certification Received _____ Date of Expiration _____
(if applicable) (if applicable)

First Equip for Ministry Course ☐ or Returning Participant: Level One: ☐ Level Two: ☐

Course Number	Course Name	Location
_____	_____	_____
_____	_____	_____

Payment registration is \$75.00 per 8 – week course

Check – make payable to **Equip for Ministry** Amount _____

Check number _____

Please mail this form with the payment to:

Equip for Ministry
Department of Evangelization
320 Cathedral Street • Baltimore, MD 21201

For online registration and payment
visit our website:
www.archbalt.org/equip

For Office Use Only

Date received _____

Companion DVD Sent _____

Companion Workbook Sent _____

Enrollment Key Sent _____