



INSTITUTE OF LAY FORMATION

Diocese of Winona-Rochester

Forming lay women and men for discipleship and Gospel witness



PARTICIPANT INFORMATION FORM (2023-2024 Formation Year)

ROSTER INFORMATION

Name (as to appear on your name tag): _____

E-mail Address (for ILF communications): _____

PARTICIPATION AT FORMATION SESSIONS

[If work and/or family commitments preclude you from participating in a session, please indicate below.]

I will need to be excused from the following formation session(s) during the year:

Fall Sessions: ___ Sept. 16; ___ Sept. 30/Oct. 7; ___ Oct. 21/28; ___ Nov. 11/18

Spring Sessions: ___ Jan. 20; ___ Feb. 3/10; ___ Feb. 24/March 2; ___ March 16/23;

___ April 13/20; ___ May 3-4 (retreat)

Comments: _____

TUITION / PAYMENT OPTIONS / SCHOLARSHIP ASSISTANCE

[Tuition for the year for the Institute is \$325.00. (Parish Eucharistic Revival “Galvanizers” receive a special discounted rate of \$250.00.) Tuition can be paid in a single payment at the beginning of the formation year, or in multiple payments throughout the year. The diocese is able to provide financial assistance, upon request.]

{Please indicate one.}

___ **My full tuition payment has been made.**

___ **My full tuition payment is included with this form.** (Payable to the “Diocese of Winona-Rochester”)

___ **My tuition will be paid in multiple payments during the year.**

I am requesting **scholarship assistance** from the diocese to help cover my fee: \$_____

Comments: _____

{continued on next page}

SPECIAL NEEDS

Do you have any special needs or requests (e.g., special dietary requirements) that you would like to express relating to your participation in the Institute? If so, please indicate them below:

Please complete this form, and return it at the session on September 16th.

Or, return it by Monday, September 18th to:

Todd Graff ~ Diocese of Winona-Rochester ~ Post Office Box 588 ~ Winona, MN 55987.

(Fax: (507) 454-8106 / Email: tgraff@dowr.org)

Thank you!