



St. Francis
Center for Renewal
Bethlehem

St. Francis Center for Renewal
Registration Form

TITLE OF PROGRAM: _____ **DATE:** _____

NAME: _____

ADDRESS: _____

TELEPHONE: (____) _____ **E-MAIL:** _____

AMOUNT ENCLOSED: _____ **CHECK NUMBER:** _____

Please make checks payable to:

St. Francis Center for Renewal, Inc.

Mail To:

St. Francis Center for Renewal
395 Bridle Path Road
Bethlehem, PA 18017

For more information please call: 610.867.8890

Weekday office hours: 9:00 am - 4:00 pm

~ or ~ Email: staff@stfranciscenterforrenewal.org

Web Site: www.stfranciscenterforrenewal.org