



ask.  
seek.  
knock.

discovering  
**CHRIST**  
a seven-week experience



# CHRIST LIFE™

CATHOLIC MINISTRY FOR EVANGELIZATION

**Have you thought about a Lenten Devotion that is more meaningful than giving up chocolate or potato chips? Please consider giving up a couple hours per week and cooking dinner on Thursday evenings in exchange for a program that can change your life and Catholic perspective!**

The combined parishes are bringing forth a 7 week program, called **Christ Life**, that has proven to be a successful DVD seminar to strengthen individual faith, marriages, and our relationships with one another as worshipping Catholics. Topics center around Jesus as our Savior and the Holy Spirit. The Pope and our Bishop have endorsed this as an important way that we, as Catholics, can help to strengthen our faith and one another as we face the consolidation of our parishes as well.

One of the major highlights throughout the seven sessions of the **Christ Life** program is being served a delicious full course dinner with social time to meet new friends from all the parishes in Greene County. After dinner we will start with a prayer and some praise & worship music and immediately begin a DVD teaching followed by a small group round table discussions .

The sessions will be held on Thursdays, February 8, 15, 22 and March 1, 15, and 22, from 6:00 pm to 8:30 pm at St Marcellus Social Hall, and will also include a retreat on Saturday, March 10, at St Ann Social Hall. To encourage couples to attend, child care will be provided.

In order to plan for child care, food preparation, and course materials, please register using the attached form no later than **January 31, 2018**. Please place the completed registration form in the collection basket or mail to your parish office. Contact Deacon Tom Raymond with any questions at 724-344-9815.

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## CHRIST LIFE REGISTRATION FORM

Name(s): \_\_\_\_\_ Yes I will/No I will not need childcare. Circle One

Preferred Phone: \_\_\_\_\_ Ages of children: \_\_\_\_\_

Email: \_\_\_\_\_ **Please list any food allergies of attendees:**

Address: \_\_\_\_\_

# of Participants: \_\_\_\_\_

# of Children: \_\_\_\_\_