



Leader of Prayer Application—Summer 2011

(Diocesan Center, La Crosse - July 15-16, Aug. 12-13, Sept. 16-17)

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ (W) _____ E-mail _____

Marital Status _____ Spouse's Name _____

Occupation _____

NOTE: In order to be admitted to the Leader of Prayer Program, it is necessary to have successfully completed the Diocesan Lay Formation Institute (formerly Lay Ministry).

1. In what year did you complete the Lay Formation Institute/Lay Ministry Program? _____

2. In what ways have you served your parish, or the Diocese?

3. Why do you wish to become a Leader of Prayer?

4. Please place a check by the highest level of education received:

High School _____ Some College _____ Undergraduate Degree _____ (in _____)

Some Graduate Studies _____ (in _____)

Graduate Degree _____ (in _____)

5. Please check here if you do NOT have a copy of Christian Prayer / Liturgy of the Hours _____

6. Signatures:

Candidate _____ Spouse (if applicable) _____

Pastor _____ Parish _____

The fee for the Leader of Prayer Program is \$450, unless some of the ritual books are available to you from the parish or other sources, which would then decrease the fee by that amount. Please place a check by the books you DO NOT need (be sure you have a copy for class).

Pastoral Care of the Sick (\$12) _____

A Ritual for Lay Persons (\$11) _____

Order of Christian Funerals (\$22) _____

Sunday Celebration in the Absence of a Priest (SCAP) (\$50) _____

Holy Communion and Worship of the Eucharist Outside Mass (\$11) _____

Shorter Book of Blessings (\$21) _____

Total remaining fee = \$450 minus any books you do not need: \$ _____. The parish you serve is asked to pay the program fee.

Please return this application form and payment (payable to the Diocese of La Crosse) by Monday, May 16, 2011 to:

Office of Ministries and Social Concerns

P.O. Box 4004, La Crosse, WI 54602-4004

ministries@dioceseoflacrosse.com | Phone: 608-791-2667 | Fax: 608-791-2675

Office Use Only: Date Received _____