



**DIOCESE OF BROWNSVILLE**  
**SAN JUAN DIEGO MINISTRY INSTITUTE**  
**MYSTICAL BODY \* MYSTICAL VOICE**  
**Registration FORM**

**PERSONAL CONTACT INFORMATION**

Name: \_\_\_\_\_

**Last**

**First**

**Middle Initial**

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

**Street Address**

**Apartment #**

**City**

**State**

**Zip Code**

Contact Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Parish Name: \_\_\_\_\_

**I'm part of this ministry: (Check all that apply)**

Extraordinary Minister of the  
Eucharist

Catechist

Musician

Lector

**Cost: \$25.00 (Includes materials, refreshments and  
lunch)**

**Please mail this form with payment (Check or Money Order **ONLY**) payable to  
Diocese of Brownsville to:**

**Mystical Body, Mystical Voice / San Juan Diego Ministry Institute**  
**700 N. Virgen de San Juan Blvd.**  
**San Juan, Texas 78589**  
**Phone: (956) 784-5011**  
**Fax: (956) 784-5086**

**Registration due by Monday, March 12, 2012**