MIGHT GOD BE CALLING TO BE HIS PRIEST?

Yearly, St. Joseph Seminary and the Vocations Office of the Catholic Archdiocese of Edmonton offer a weekend live-in experience for men who are discerning a call to the diocesan priesthood. If you've been thinking and talking about the priesthood, now's the time for action: come and see for yourself! Ask questions, express your concerns, meet seminarians, and pray to know God's will.

There is no cost to you, and no obligations. This weekend is a great opportunity for your discernment journey. You will meet the team of amazing priests who train and form future priests, our current seminarians who are in ongoing formation and discernment, and other men like yourself who are discerning the Lord's will for their lives.

So, Come & See us at St. Joseph Seminary, a beautiful place where Our Lord Jesus Christ continues to build up his Church and provide priests for tomorrow!

ST. JOSEPH "Put out into the deep and let down your nets for a catch: SEMINARY Luke 5:4-5 COME WEEKENDS January 26-28, 2024 Please send completed forms to... St. Joseph Seminary 9828 - 84th Street NW Edmonton, Alberta T6A 0B2 Ph: 780-392-2445 Fx: 780-461-3858 Email: secretary@stjoseph-seminary.com Photo: Jason Ness

TO KNOW

- Arrive Friday between6:30 PM & 6:45 PM
- Program begins at 7 PM (please eat supper before)
- Weekend finishes after lunch on Sunday
- Meals and individual rooms are included with beds, bedding, private washrooms & towels
- Free parking on site

TO BRING

- → Pen
- Notebook/Journal
- ⇒ Bible
- Rosary
- ⇒ Alarm Clock
- Collared shirt and dress pants for Sunday Mass
- Seasonally appropriate clothing
- Optional—sports clothes and indoor gym shoes
- Optional—books to read

Registration Information (Participants must be in grade 12 or older)

Register early as space is limited. Registration deadline is January 18, 2024

☐ January 26-28, 2024 First Name: _____ Last Name: _____ Birthday (mm/dd/yy): *Age (as of the weekend): *If under 18 years old, please contact the secretary at the Seminary for a Parent Permission Form. Address: City: _____ Prov.: ____ Postal Code: _____ Email: Cell Phone: Home Phone: Diocese: Provincial Health Card Number: Medical Info. & Allergies/Food Sensitivities: **Emergency Contact:** Name: Relation: Phone: Arrival/Departure Information: ☐ Driving Need to be picked up? Y N Location: _____ Arr. Time: _____ ☐ Bus Need to be dropped off? Y N Location: _____ Dep. Time: Need to be picked up? Y N Flight #:_____ Arr. Time: _____ ☐ Flight

Need to be dropped off? Y N Flight #:_____ Dep. Time:____