

# World Priest Program – Registration Form



*Saint Meinrad*  
Seminary &  
School of Theology  
Institute for  
Priests and Presbyterates

☐ March 16 – 20, 2026

**Workshop Fee - \$1000.00**

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

**Home Diocese or Religious Order:** \_\_\_\_\_

**Country of Origin:** \_\_\_\_\_

**U.S. Diocese/Religious Order:** \_\_\_\_\_

**Current U.S. Assignment:** \_\_\_\_\_

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

**Position Title: (Associate Pastor, Pastor, Chaplain, etc.):** \_\_\_\_\_

**Date of Ordination:** \_\_\_\_\_ **Arrival date to USA:** \_\_\_\_\_

**Office Phone Number:** \_\_\_\_\_

**Cell Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Best method to contact you?** ☐ E-mail ☐ Parish Office ☐ Cell Phone

**Special dietary requirements?** \_\_\_\_\_

**For those arriving by air**

The Institute for Priests and Presbyterates (IPP) recommends air travel into Louisville, KY (airport code - SDF). The airport is approximately 75 minutes from Saint Meinrad. Louisville is in the Eastern time zone, one hour ahead of Saint Meinrad, which is in the Central time zone. The IPP offers round-trip shuttle from the Louisville airport for those who request it. Arriving flights should arrive Monday by 3:00PM Eastern time and depart Friday after 4:00PM Eastern time to coordinate with the workshop schedule.

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**Additional night's accommodations and meals**

Workshop fee includes meals and overnight accommodations from Monday supper through Friday lunch. Additional overnight accommodations and meals, subject to availability, are in addition to the workshop fee. Call by registration deadline for availability and pricing on rooms and meals.

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**Fees**

- |   |                   |
|---|-------------------|
| <input type="checkbox"/> Workshop Fee                             | <u>\$1,000.00</u> |
| <input type="checkbox"/> Round-trip airport shuttle (if required) | <u>\$50.00</u>    |

**Form of payment:**   ☐ Check   ☐ Credit Card # \_\_\_\_\_ Exp \_\_\_\_\_

Security Code \_\_\_\_\_

Name on credit card \_\_\_\_\_

☐ Bill my diocese      Contact Person: \_\_\_\_\_

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

Address (cont): \_\_\_\_\_

City, ST Zip      \_\_\_\_\_

**Space is limited – early registration is appreciated.**