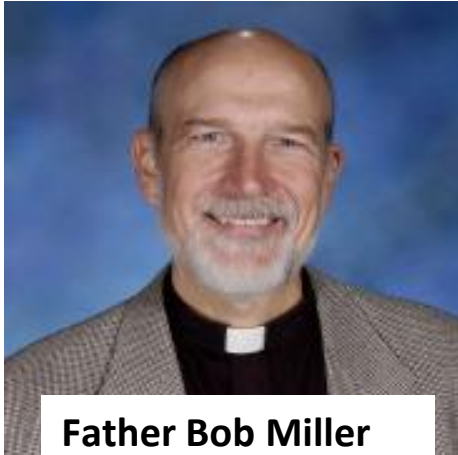


Charismatic Day of Renewal

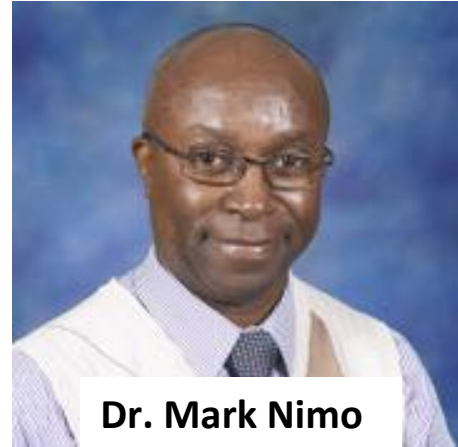
“What Would Jesus Have ME Do?”

(WWJD?) And How Will He help Me Do It?



Father Bob Miller

Father Robert Miller professed vows as a Redemptorist in 1970 and was ordained a priest in 1976. From 1981-1988 he was a member of the Redemptorist Mission Team in Chicago and traveled the country preaching missions, retreats and parish renewals. His work also included Marriage Encounter, the Charismatic Renewal, retreat/mission preaching, and healing/charismatic Masses around the Midwest. In 1986, he graduated from the Pecos School for Catholic Charismatic Spiritual Directors. In 1990, Father Bob officially became a priest of the Archdiocese of Chicago and has ministered in various parishes there. He has authored six books, and since 1994, he has taught Church History (Ecclesiology) in the Deacon & Lay Ministry Formation programs of the Chicago Archdiocese.



Dr. Mark Nimo

Born in 1964 in Ghana in West Africa, Mark Nimo had a profound conversion experience at the age of twenty, and he became actively involved in the Catholic Charismatic Renewal Movement. Nimo represented all English and Portuguese speaking countries in Africa. He has ministered in 37 countries on all continents of the world.

Mark studied at the Catholic Theological Union in Chicago, earning a Master of Arts in Pastoral Studies. He also earned the Ecumenical Doctor of Ministry degree in May, 2012. Mark currently teaches at St. Dorothy School and serves as Director of Religious Education at St. Columbanus Church in Chicago.

April 27, 2019
Registration 8:30 a.m.
9:00 a.m. – 3:00p.m.

St. Patrick Parish Center
236 Kelley Drive
Rochelle, Illinois

Join with us on this exciting day!!
Please bring a sack lunch – Free will offering accepted
Registration fee is \$10 per person or \$25 per family: To Register:

Send this form with check made out to CCRS to: Linda Daniel, 2944 Greenwood Acres Drive, Apt. W326, DeKalb, IL 60115

For more information call Linda 815-264-3240, or trumpetpraise2@yahoo.com

Name _____
Address _____
Email / Phone _____
Home Parish _____

Please make checks payable to: CCRS



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