



SCHOOL OF MINISTRY

Pen-Florida District Council ■ PO Box 24687 ■ Lakeland, FL 33802-4687 ■ 863.683.5726 x 245 ■ www.penflorida.org

2011/2012 Registration Form

REGISTRATION Mail the completed registration form below, including fees, to the address listed above. To register, check the box beside the date/location and each class you wish to attend. Tuition is \$50 per course. *Submit transcripts from any educational institution that might preempt the courses listed below.*

DEADLINES *Registration* – you must register by the 15th of the month prior to the class. Registration orders postmarked after the 15th will not be processed.

STUDY This includes both reading and writing assignments in advance. Begin reading your textbook as soon as you receive it since you must arrive with thorough knowledge of the subject. You also need to complete and bring with you the study guide. A copy of your *completed* study guide must be submitted at the beginning of class for grading. The study guide counts toward 40% of the final grade for the course.

ARRIVAL Check-in begins at 8:30 a.m. with class beginning at 9:00 a.m. and ending at 5:00 p.m. Locations: Evangel Assembly of God, 350 South Berner Road, Clewiston 33440; Ocala First Assembly, 1827 NE 14th Street, Ocala 34470.

Please print legibly, using block letters or type

Name: _____ M F
 Address, City, State, Zip: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Email: _____ Fax: _____ Birth Date: _____

C = Clewiston O = Ocala L=Lakeland	Level One (Certified Minister)	Level Two (Licensed Minister)	Level Three (Ordained Minister)
<input type="checkbox"/> Sept. 3 C <input type="checkbox"/> Sept. 10 O	<input type="checkbox"/> Introduction to Hermeneutics	<input type="checkbox"/> Eschatology	<input type="checkbox"/> Corinthians
<input type="checkbox"/> Oct. 1 C <input type="checkbox"/> Oct. 8 O	<input type="checkbox"/> Prison Epistles	<input type="checkbox"/> Missions	<input type="checkbox"/> Preaching in a Cultural Context
<input type="checkbox"/> Nov. 5 C <input type="checkbox"/> Nov. 12 O	<input type="checkbox"/> Evangelism	<input type="checkbox"/> Introduction to Theology	<input type="checkbox"/> Church Administration, Law & Finance;
<input type="checkbox"/> Jan. 7 C <input type="checkbox"/> Jan. 14 O	<input type="checkbox"/> A/G History, Missions, Governance	<input type="checkbox"/> Romans	<input type="checkbox"/> Theology of Worship
<input type="checkbox"/> Feb. 4 C <input type="checkbox"/> Feb. 11 O	<input type="checkbox"/> Synoptic Gospels	<input type="checkbox"/> New Testament Survey	<input type="checkbox"/> Pastoral Ministry
<input type="checkbox"/> Mar. 3 C <input type="checkbox"/> Mar. 10 O	<input type="checkbox"/> Introduction to Pentecostal Doctrine	<input type="checkbox"/> Introduction to Homiletics	<input type="checkbox"/> The Poetic Books
<input type="checkbox"/> Apr. 7 C <input type="checkbox"/> Apr. 14 O	<input type="checkbox"/> Relationships & Ethics in Ministry	<input type="checkbox"/> Old Testament Survey	<input type="checkbox"/> Pentateuch
<input type="checkbox"/> May 5 C <input type="checkbox"/> May 12 O	<input type="checkbox"/> Acts	<input type="checkbox"/> Leadership Skills	
<input type="checkbox"/> June 9 L		<input type="checkbox"/> Conflict Resolution	<input type="checkbox"/> How to Plant A Church
	<input type="checkbox"/> Beginning Internship Requirements met throughout the school year	<input type="checkbox"/> Intermediate Internship Requirements met throughout the school year	<input type="checkbox"/> Advanced Internship Requirements met throughout the school year

TOTAL FEES ENCLOSED: Tuition (\$50/course) \$ _____

Make check or money order payable to PFDC and mail with completed form to:
 Pen-Florida District Council – DSOM, PO Box 24687, Lakeland, FL 33802-4687
 Register online at <http://www.penflorida.org/318386.ihmtml>



SCHOOL OF MINISTRY

CREDIT CARD PAYMENT OPTION

CREDIT CARD (please print)

International credit cards will be assessed additional fees.

Name as it appears
on card: _____

Billing Address _____ City/State _____ Zip _____

Phone # () _____ VISA MASTERCARD

Card Number _____ Expiration Date (mm/yy) _____ Amount \$ _____

Printed Signature _____ Signature _____

Office Use Only: Account # _____

Pen-Florida District Council ■ PO Box 24687 ■ Lakeland, FL 33802-4687 ■ 863.683.5726 x 245 ■ www.penflorida.org