

The Wesleyan Holiness Barbados District

Diploma in Christian Ministry

Student Registration Form

Please complete all information on form (Print clearly)

Please tick the appropriate box: Mr. Miss Mrs. Ms.

Surname: _____

First name: _____

Address: _____

Tel. Nos. (H) _____ (W) _____ Cell _____

Email: _____

Church _____

Pastor _____

Tel. No. _____

Please register me for the following subjects:

1. _____

3. _____

2. _____

4. _____

Person to contact in case of emergency: _____ Tel. No. _____

Relationship to you: _____

Reason for study: Personal Development Ministerial

- ❖ *All students must complete a minimum of nine (9) classes to be considered eligible for a complete course.*
- ❖ *All outstanding assignments and financial commitments must be settled no later than twenty-one (21) days after completion of course(s).*
- ❖ *Failing the above, students are deemed to be INCOMPLETE in their courses.*

Registration Fee: _____ Course Fee: _____

Signature: _____

Date: _____