



CLASS REGISTRATION

L.A. DISTRICT TRAINING CENTER in alliance with Nazarene Bible College

Track: [] Elder [] Deacon
[] Certification [] Bible [] Theology [] Church Administration [] Preaching [] Evangelism []
Ministry Area: _____ **ADM** = Administration, **CE** = Christian Education, **CH** = Chaplaincy,

CM = Compassionate Min., **LC** = Lay Certificate., **LM** = Lay Min., **P** = Preaching, **YM** = Youth Min.

NAME:

Last First Middle

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____ PHONE: _____

Financial aid requested:

School Year _____ Fall Winter Spring Summer Tuition: \$200.00

CLASS NUMBER: _____ CLASS NAME: _____

Student's Signature _____ Date : _____

Send this application form with your check to:

Registrar, L.A.D.T.C.

Los Angeles District Office

225 E. Santa Clara St., Suite 300 Arcadia, CA 91006-7234 **[Please include last four zip code digits]**

For any questions regarding ministerial training courses you may contact:

Rev. Ramiro Juárez: (909) 210-5096 or ladistrict.training.center@gmail.com.

For Training Center Use Only:

_____ Registrar's Signature Date

Tuition Paid: _____

Financial aid given:
