

THE OVERCOMERS EVANGELICAL MINISTRIES INTL

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THE OVERCOMERS DRAMA COLLEGE COURSE
BASIC CERTIFICATE PROGRAMME IN CHRISTIAN DRAMA ARTS

REGISTRATION FORM

FIRST NAME:.....

LAST NAME:.....

MARITAL STATUS:.....

BIRTHDAY:.....

CONTACT ADDRESS:.....

.....

POSTAL CODE:.....

COUNTRY:.....

TELEPHONE:.....

CHURCH:.....

SKYPE ID:.....

DO YOU HAVE A BACKGROUND KNOWLEDGE OF DRAMA:.....

.....

ARE YOU INVOLVE IN DRAMA MINISRTY AT THE MOMENT?.....

IF YES WHERE:.....

.....

PREFERED TIME FOR CLASS:.....

SIGNATURE:.....

DATE:.....

The form should be returned before September 25th 2015.