ISOM - CORE Church Application Form

Church Name:		
Address:		
	Postal Code:	
	Tel: _(
Pastor's Name:	Cell#:	
	f	
Trimester: 1, 2 3	5 4 5 (check or color the	square)
Language Required for V	DEO: Eng. Express, Eng/Tag	, Eng/llok , Eng/Ceb/Viz
Notes: Eng + Tag	, Ilok, Ceb/Viz Total Nu	mber of students registered:
Venue where classes w	ill be held:	
ISOM Express (English onl	v)	
	m Student manuals. The DVD set c	ost \$175.00 or Peso equivalent pe
•	aight P1150.00 per student per Trir	•
Example: For 1	0 students the total cost is P1150.00 per Tr	rimester plus \$175.00.
ISOM / Tagalog, Cebuano (register EVERY TRIMESTER)	or Ilokano Translation, cost per stu	dent: (Minimum of 10 students to
For minim	num of 10 students P1000 each,	Example: For 10 students the total cos
<u>per</u> Trime	ester <i>per</i> Student	is P10,000.00 per Trimester. This includes Student registration, manual Admin Guide & Video Material set.
NOTE: All student	registration fees are non-refund	lable and non-transferable.
Proposed date on which (Classes will Start:	Date on which Classes
should be finished for Trim	ester # 1 (+/- 12 Weeks after Start	ing date)
-		
<u>Please note, </u>	<u>no material, video or print</u>	ed may be copied!
1	tion as <u>SIGNED</u> by the Senior Past are typed in above and this form is	
Senior Pastor's name and	signature :	
Joiner i dotor o name and t		
Instructor's name and sign	ature (if Different to the above):	
		_

ISOMPHILS.ORG



E-mail: isomphils@yahoo.com CP #: 0919.335.88.59 / 0917.947.6391

STUDENT APPLICATION FORM (CHURCH COPY)

Turning every Church into a Planting Center

Name:	
Address:	
Telephone#: ()	Cell.#:
Email Email/FaceBook accn	t:
Birth Date:	_
Date of Salvation:	Date Baptised:
	nember of a local church? y/n
Do you serve in a church pos	sition?: y/n If yes, how long?:
Do you have a specific call of	God on your life? If yes, share briefly:
Church Name:	
Church Address:	
Signed:	Date:
STUDEN	T APPLICATION FORM (ISOM COPY)
<u>810311</u>	
Name:	
	Cell.#:
Email/FaceBook accnt:	
Birth Date:	Date Baptised:
Date of Salvation:	Date Baptised:
Are you presently an active n	nember of a local church? y/n
Do you serve in a church pos	sition?: y/n If yes, how long?:
Do you have a specific call of	God on your life? If yes, share briefly:
Name of Your Pastor:	
Signed:	Date:

We consider this application as <u>SIGNED</u> by applicants when their names are typed in above and this form is <u>EMAILED</u> to us. Only one (1) form per student is needed.