

KARUNYA UNIVERSITY
Karunya Institute of Technology and Sciences
(Declared as Deemed to be University under sec 3 of the UGC act 1956)
SCHOOL OF MANAGEMENT
MDP FOR PASTORS AND CHURCH LEADERS
5th – 7th MAY 2010

REGISTRATION FORM

Personal Details

Name of the participant (in capital letters): _____

Age (in years): _____ Gender: Male _____ Female _____ (kindly tick mark)

Native place: _____ Currently located at (town/city): _____ State: _____

Education (tick mark relevant qualification)

Higher Secondary _____ Graduate _____ Post Graduate _____ Doctorate _____

Others (please specify) _____

Marital Status: Unmarried _____ Married _____ Divorcee _____

Occupation: Church Pastor (please provide church affiliation) _____

Evangelist _____ Missionary (organization) _____

Church Information:

Name of the church where you worship: _____ Diocese: _____

Your role/capacity in the church (tick relevant category)

Pastor _____ Committee Member _____ Lay Preacher _____ Fellowship Leader _____

Others (please specify) _____

Name of your pastor: _____

Contact information of your pastor: Landline: _____ (with STD Code)

Mobile: _____

Email ID: _____

Other information:

Number of Non Participating members who will accompany: Adults _____ Children _____

Food preference: Vegetarian _____ Non Vegetarian _____

(Signature of the participant)

Duly filled in Registration Form along with the DD should be sent to "THE ORGANIZING SECRETARY, MDP FOR PASTORS AND CHURCH LEADERS, SCHOOL OF MANAGEMENT, KARUNYA UNIVERSITY, COIMBATORE – 641114 on or before 15th April 2010