

CCC Sharon Teachers Registration Form

***Required**

1. Full name *

2. Date of Birth (Month and day only for example "May 23") *

3. Occupation *

4. Phone number *

5. Email

6. Gender *

Mark only one oval.

☐ Male

☐ Female

7. How long have you been A Celestial? *

8. Have you been a teacher of the word of God before? *

Mark only one oval.

☐ Yes

☐ No

9. If yes how long have you been teaching?

10. Have you done baptism in Celestial Church before? (We mean in Celestial Church of Christ not other denomination) *

Mark only one oval.

☐ Yes

☐ No

11. What prompt you to join CCC Sharon Teaching ministry? *

12. Your home address *
