

NORTH CENTRAL MINISTRY DEVELOPMENT CENTER

**516 Mission House Lane
New Brighton, MN 55112
651-636-5120**

**Website: www.ncmdc.org
Email: ncmdc@comcast.net**

REGISTRATION FOR INDIVIDUAL PROGRAM

Name _____
(Last) (First) (MI)

Address _____
(Street) (City) (State) (Zip)

Telephone _____ Email _____
(Home) (Work)

Employer _____ Lay _____ Ordained _____

Denomination _____ Judicatory _____
(for church professionals) (Conference, Presbytery, Synod, etc)

Age _____ Marital Status _____ Spouse/Fiancé(e)/Partner Name _____

**I. Participation by spouses, fiancé(e)s, and partners is encouraged at our Center.
Please check the option of your choice:**

- Complete program as a joint client (Please contact for additional fees for persons qualifying for “member” rates)
- Partial Participation (emphasis is on one career; no testing is provided)
- Does not plan to participate
- Not applicable

II. I was referred to the Center by:

Myself
 Other: Name _____ Position _____

Address _____
(Street) (City) (State) (Zip)

If you were referred to our Center by a church/denomination official, is a written report being requested by that person? Yes No

