

REGISTRATION FORM
The Art of Transitional Ministry, Week 1
Pittsburgh Theological Seminary
Office of Continuing Education
March 6-10, 2017

NAME _____
(Rev., Dr.)

STREET _____

CITY _____ STATE _____ ZIP _____

OFFICE PHONE _(_____) _____ HOME OR CELL _(_____) _____

EMAIL _____

CHURCH OR EMPLOYER _____

POSITION HELD _____

PRESBYTERY/DENOMINATION MEMBERSHIP _____

INTERIM EXPERIENCE _____

Registrations will not be accepted until we receive this form signed by the Executive Presbyter or Committee on Ministry Moderator for your Presbytery. For other denominations, a signature from a person in a judicatory position in your denomination is required.

The Committee on Ministry of _____ Presbytery verifies that:

- (a) the registrant is a member in good standing in this Presbytery; and
- (b) we have validated this person as appropriate for transitional/interim ministry and service.

Signature/Title _____ Date _____

Return this form to:

Pittsburgh Theological Seminary
Office of Continuing Education
616 N. Highland Ave.
Pittsburgh, PA 15206

Phone: 412-924-1345
Fax: 412-924-1745
Email: ConEd@pts.edu

REGISTRATION DEADLINE: February 17, 2017 *** REGISTRATION IS LIMITED.**

NEED OVERNIGHT HOUSING? Contact our Hospitality Office by phone at 412-924-1397 or email at reception@pts.edu. Be sure to mention that you will be participating in the Transitional Ministry program.