

ISAIAH REGISTRATION

(Limited to first 60 paid applicants)

DATE: _____

ATTENDED PHILIP: YES _____ NO _____

IF YES, WHAT YEAR _____

FAITH INTO FIRE: YES _____ NO _____

IF YES, WHAT YEAR _____

PAID BY CHECK # _____ CASH _____
DEPOSIT _____ BALANCE DUE _____

PLEASE MAKE CHECKS PAYABLE TO C.C.C.

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

HM #: _____ CELL#: _____ WK#: _____

PARISH: _____

EMAIL ADDRESS: _____

Please return completed form w/\$25 Check or Money Order payable to:

C.C.C.

1949 Cullen Blvd

Houston, TX. 77023

Attach Check or Money Order here