

Section B

To be completed by your church leader

Name of church leader

Address

Postcode

Phone number

Email

Name of church

I support this application (please write any additional comments below).

Signed

Date

Comments:



Application for enrolment 2010-11

If you would like to join the course beginning in September 2010:

- Complete **Section A** of the form.
- Discuss your application with your church leader and ask them to complete **Section B** to indicate their support for your application.
- Write a deposit cheque for £20, payable to TEAM (refunded if you do not join the course).
- Send your form and deposit, by the **end of June** to:
Louise Silk TEAM Administrator, Christ Church Cambridge, Christchurch Street, Cambridge CB1 1HT
Email for enquiries: teamadmin@christchurchcambridge.org.uk

Section A

Your full name

Title

Correspondence address

Postcode

Phone number

Mobile

Email

Date of birth

Current employment

