

ECUMENICAL INSTITUTE FOR MINISTRY
COURSE REGISTRATION FORM

5825 Coors Blvd., SW
Albuquerque, NM 87121
505-873-4399, ext. 204
FAX: 505-873-4667

Date: _____

Course Name

Cost for Course: \$80.00

Paid _____

Your Name (Last name, First name, Middle Initial)

Address (Street, City, State, Zip)

Phone #

E-Mail

Church Name

Please return this form with your check for registration to:

Meg Ashcroft
EIM Registrar
5825 Coors Blvd, SW
Albuquerque, NM 87121