

Registration Form

Psalm 40 Ministries Workshop – WWMD (What Would Mark Do?)

Date: \_\_\_\_\_

Personal Information  
(Please Print)

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

Church \_\_\_\_\_

Interpreter Certification

Do you hold any interpreter certification? If so, what do you have?

\_\_\_\_\_

Interpreting Experience

Briefly describe your experience in the following areas:

Church Interpreting \_\_\_\_\_

\_\_\_\_\_

Education Interpreting \_\_\_\_\_

\_\_\_\_\_

Platform Interpreting \_\_\_\_\_

\_\_\_\_\_

Community Interpreting \_\_\_\_\_

\_\_\_\_\_

### Cost

- \$60.00 per participant (Includes Saturday lunch)
- Participant responsible for his or her own travel & lodging.
- If you need transportation from the airport, please include your flight information so that arrangements can be made.

### Payment Options

\$60.00 money order enclosed

Check enclosed (payable to Psalm 40 Ministries)

Credit Card (Circle one) Visa MasterCard American Express

Name on Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Last 3 digits on back of card \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

### Cancellation Policy

If you cancel the week of the workshop, your registration money is non-refundable.

Send completed Registration form to:

Melanie Mitchum  
Psalm 40 Ministries  
P.O. Box 14196  
Arlington, TX 76094  
817-375-8850

Email: [markmitchum@att.net](mailto:markmitchum@att.net)