New Ordinand Information Form Cumberland Presbyterian Church

Presbytery:				
Name of Person to be Ordained:				
Address:				
City:	State:		Zip:	
Phone:	Email:		<u>-</u>	
Day of Ordination:		Ordination Se	ervice to l	be held at:
Name of Congregation:				
Address:				
City:	State:		Zip:	
Phone:	Email:		<u>-</u>	
If a member of the PDMT cannot be presportable communion set, we will send it responsible for making the presentation designated person below.	t to a person in t	he presbytery	who we	will ask to be
Name:				
Address:				
City:		State:	Z	/ip:
Phone:	Emai	l:		

Send completed form to:

Cumberland Presbyterian Church
Pastoral Development Ministry Team
8207 Traditional Place
Cordova, TN 38016
Or email this form to pdmt@cumberland.org

