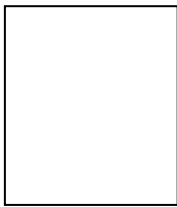




# Train the Trainers August 24 - 28, 2009 Toronto, Canada

## APPLICATION FORM

PLEASE PRINT OR TYPE ALL YOUR ANSWERS



Place one photo here *(Please enclose a second photo)*

Application Date: \_\_\_\_\_ (MM/DD/YY)

Name: (Mr., Mrs., Miss) \_\_\_\_\_  
FIRST LAST MIDDLE

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: (Please print as this should appear on a mailing label for your country)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Birth date: \_\_\_\_\_ (MM/DD/YY) Sex:  Male  Female

Marital Status:  Single  Married  Separated  Divorced

**CHURCH BACKGROUND**

Current church \_\_\_\_\_

Denomination \_\_\_\_\_

Partners in Harvest  Friends in Harvest

Senior Pastor's name (if you are not the Sr. pastor) \_\_\_\_\_

Is the Senior Pastor/Minister of your local church body in agreement with your plans?

Yes  No

How long have you attended at this church? \_\_\_\_\_  Year(s)  Month(s)

What size is the church? \_\_\_\_\_

**EMERGENCY CONTACT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone number: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

**Note: To be eligible you must have completed**

**Either**

Soaking School \_\_\_\_\_  
Where When

**or**

Soaking in His Presence Weekend/Soaking Seminar \_\_\_\_\_  
Where When

**PLUS one of the Following Schools of Ministry**

School of Ministry \_\_\_\_\_  
Where When

Leader's School of Ministry \_\_\_\_\_  
Where When

International LSoM \_\_\_\_\_  
Where When

## **ACCOMMODATION:**

If you wish to stay at the School of Ministry, our accommodation is offered in single sex dormitories in the old firehall. Places will be allocated on a first – come, first serve basis.

However, for those who would prefer to share a room with their spouse, there are a limited number of rooms available to be reserved at an adjusted cost. These rooms do NOT have double beds, but are offered for those who would prefer the privacy and comfort of sharing a room with their spouse. Space is limited and will be offered on a first come, first serve basis.

If you have any questions concerning accommodation please contact Lisl Wessels at 416 674 8463.

For alternative accommodation options please refer to our website: [www.tacf.org](http://www.tacf.org) (click on visitors, then accommodation) or call our contact center: 1 (416) 674 8463

**To be considered for this training you must have completed: A Soaking Prayer School or Soaking in His Presence Weekend AND an International Leaders School or Leaders School.**

If you have not completed an International Leaders School or a Leaders School please contact the School of Ministry office 1(416) 674 8463 ext 2627 for information on how to register for one of these schools.

## **PLEASE RETURN COMPLETED APPLICATION TO:**

Catch the Fire Ministries, 272 Attwell Drive, Toronto, Ontario, M9W 6M3, Canada.

## **OR FAX/EMAIL:**

Fax: 416 674 8465

Email: [ttt@ctfministries.com](mailto:ttt@ctfministries.com)

**Note: Attendance at Train the Trainers is not an automatic guarantee that you will be released as a Catch the Fire speaker.**

## **REFERENCES**

If you are not the Senior Pastor or Minister of your local church body you will need to have the attached Pastoral Reference completed. We want to invite his/her counsel and input with regards to your application.

Thanks for your interest in helping us bring the Father's love to the Nations of the earth.

In the Father's Love,



International Trainers for Catch The Fire Ministries  
International arm of TACF



# **Train the Trainers August 24 – 28, 2009 Toronto, Canada**

LETTER TO SENIOR PASTOR

---

Dear Pastor,

Toronto Airport Christian Fellowship (TACF) and Catch the Fire Ministries (CTF) are conducting Training Schools and Seminars around the world. It is our desire to bring the message of the Father's Love to all the Nations of the earth. In order to accomplish this we are planning to raise up teachers and trainers in the nations. You have been given this form by someone from your congregation who wishes to be trained as a teacher.

The curriculum is designed for those who desire to be used by God to bring the message of healing and wholeness, and the value of being in the Presence of God, to their community. The four key values of our ministry are: Hearing God's Voice; The Father Heart of God; Healing of Life's Hurts and Moving in the Prophetic.

With this in mind we would be grateful if you could complete the attached reference form so we can assess if this training is right for the applicant. All information on this form is confidential. Please return your completed form directly to Catch the Fire Ministries.

We are looking forward to hearing from you.

In the Father's Love,



International Trainers for Catch The Fire Ministries  
International arm of TACF



# Train the Trainers

## August 24 – 28, 2009

### Toronto, Canada

#### SENIOR PASTOR'S Reference Form (Confidential)

---

---

(To be completed by applicant)

**Name of Applicant** \_\_\_\_\_

Senior Pastor's Name \_\_\_\_\_

Home Church \_\_\_\_\_

Denomination \_\_\_\_\_

Address \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Fax: \_\_\_\_\_

#### **To be completed by Pastor**

1) How long have you known the applicant? \_\_\_\_\_  Month(s)  Year(s)

2) How well do you know the applicant?

Very well  Well  Casually  By Sight Only

Comments: \_\_\_\_\_

3) What leadership role(s) does the applicant fulfill in the church?

\_\_\_\_\_  
\_\_\_\_\_

4) How long has the applicant been serving in this/these roles?

\_\_\_\_\_  
\_\_\_\_\_

5) Overall, what do you consider to be the applicant's strong points?

\_\_\_\_\_

---

6) Are you aware of any significant character issues or weak points? (Please describe)

---

---

---

7) Do you have any reservations about the applicant attending this training?

---

---

---

8) Have you released the applicant to minister in your church?

---

---

---

9) Does the Applicant have an ability to teach?

---

---

---

To the best of my knowledge the above information is correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_ (MM/DD/YY)

Thank you for your time and help with this application.

**Please direct this form to:**

**Catch the Fire Ministries**  
**272 Attwell Dr.**  
**Toronto, Ontario,**  
**Canada. M9W 6M3**  
**Or fax (416) 674-8465**  
Or email: [ttt@ctfministries.com](mailto:ttt@ctfministries.com)