

**2018 A-SSM ENROLLMENT FORM (Revised)**  
**ACTS - SCHOOL OF SUPERNATURAL MINISTRY**  
 110 Lorong 23 Geylang #07-05/06, Singapore 388410

Paste  
Your  
Photo  
Here

Full name: \_\_\_\_\_ Gender:  Male  Female

NRIC No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_ Singapore \_\_\_\_\_

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

Contact number: \_\_\_\_\_ (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (HP)

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

Ministry in Church: \_\_\_\_\_ Occupation: \_\_\_\_\_

Highest Academic Qualification: \_\_\_\_\_

Dates: 16 Jul – 21 Sept 2018

Venue: Eternal Life Assembly, Auditorium 2, 6<sup>th</sup> floor, Bukit Timah Shopping Centre

I plan to attend the full programme (10 weeks) of A-SSM: Yes/ No.

No.	Workshops	Plan to (Yes?)	Workshops attended
1.	Gifts of Holy Spirit (16-17/7)		
2.	Spiritual Leadership (18,27/7)		
3.	Prayer & Fasting (19-20/7)		
4.	Signs & Wonders (23-24/7)		
5.	Hearing God's Voice (25-26/7)		
6.	Demonic Deliverance (30-31/7)		
7.	Spiritual Warfare (1-2/8)		
8.	Fruit of Spirit (3, 8/8)		
9.	Inner Healing (6-7/8)		
10.	Living by Faith (10,13/8)		
11.	Prophesying (14-15/8)		
12.	Supernatural Living (16-17/8)		
13.	Holy Spirit & You (20-21/8)		
14.	Fanning Revivals (23-24/8)		
15.	Discover Your Spiritual Gifts (27-28/8)		
16.	Presence of God (29-30/8)		
17.	Bible Interpretation (31/8, 7/9)		
18.	David's Tabernacle Worship (3-4/9)		
19.	God's Healing Generals (5-6/9)		
20.	Spiritual Journaling (10-11/9)		

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21.	Divine Healing (12-13/9)		
22.	Dreams & Visions (14/9)		
23.	Sharing the Word (17-18/9)		
24.	Healing-Tool of Evangelism (19-20/9)		
	<b>TOTAL WORKSHOPS:</b>		

I agree to let ACTS College/A-SSM use my photograph taken in all college events or activities for official purposes and publications.

I disagree to let ACTS College/A-SSM use my photograph taken in all college events or activities for official purposes and publications.

1. I would like to be contacted through the following

Phone calls

Emails

SMS

Any of these

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

FOR OFFICIAL USE ONLY

Acknowledged by:  Date:	Approved by:  Date:	Date of Registration:  Fee paid:
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