

Registration Form
(Please Print)

Mr. / Mrs. / Dr. / Pastor / Miss / Other:* _____ Date: _____

First and Last Name:* _____

Registered Spouse Name:* _____

Registered Children's Names:* _____

Address: _____

City:* _____ State:* _____ Zip: _____

Ministry or Organization (Optional):* _____

Home Phone: (____) _____ (* as they should appear on name tags)

Work Phone: (____) _____ Cell Phone: (____) _____

E-Mail Address: _____

Comments: _____

Would you like to receive correspondence from GPTS? Yes No Already do

Tuition: Early Bird rate through Jan 29, Standard rate Jan 30 - Mar 4

Regular (Early Bird / Standard) \$65/90 = _____

Spouse \$30 = _____

Student or Prospective Student (E/S) \$20/25 = _____

Spouse \$20 = _____

Children over 12 (minor/dependent children, not adult children and friends) _____ x \$20 = _____

Fees: (children 4 and under eat free)

Tuesday Dinner _____ x \$8 = _____

Wednesday Lunch _____ x \$7 = _____

Childcare (number of children) _____ x \$45 = _____

TOTAL: _____

(after Mar 4, onsite registration is Regular \$95, Student \$30)

Payment method:

Credit Card Amer Expr VISA Mast Cd Discover

Credit Card Number: _____

Name on Card: _____

Exp (mm/yy): ____/____ Billing zip code: _____ (if different from above)

Check (made out to Greenville Seminary or GPTS)

Cash (please do not mail cash)

Mail form & payment to GPTS Conference, PO Box 690, Taylors, SC 29687

SPRING THEOLOGY CONFERENCE • MARCH 9-11, 2010

Greenville Presbyterian Theological Seminary

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