

SPRING THEOLOGY CONFERENCE • MARCH 13-15, 2012

Registration Form

(Please Print)

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

First and Last Name:* _____

Registered Wife's Name:* _____

Registered Children's Names:* _____

Address: _____

City:* _____ State:* _____ Zip: _____

Ministry or Organization (Optional):* _____
(* as they should appear on name tags)

Home Phone: (____) _____ Cell Phone: (____) _____

E-Mail Address: _____

Comments: _____

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

Tuition: Early Bird rate through Feb. 3, Standard rate Feb. 4 - Mar. 8
(after Mar. 8, onsite registration is Regular \$100, Alumnus \$85, Student \$30)

Regular (Early Bird / Standard) \$70/95 = _____

Alumnus \$55/80 = _____

Wife (Regular or Alumnus) \$35 = _____

Student or Prospective Student \$20/25 = _____

Wife \$20 = _____

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

Fees: (children 4 and under eat free)

Tuesday Dinner _____ x \$10 = _____

Wednesday Lunch _____ x \$8 = _____

Childcare (4 & under) _____ x \$45 = _____

Ages: _____ TOTAL: _____

Payment method:

Credit Card Amer Expr VISA Mast Cd Discover

Credit Card Number: _____

Exp (mm/yy): ____/____ Billing zip code: _____

Name on Card: _____

Check (made payable to Greenville Seminary or GPTS)

Cash (please do not mail cash)

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

Greenville Presbyterian Theological Seminary

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First and Last Name:* _____

Registered Spouse Name:* _____

Registered Children's Names:* _____

Address: _____

City:* _____ State:* _____ Zip: _____

Ministry or Organization (Optional):* _____
(* as they should appear on name tags)

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