Scepter of Authority Prayer Institute **Registration Form**

| **Section A: course Information** | |
| --- | --- |
| **Course Name: Course Date:** | |
| **Course Fee: $150.00 (USA Currency)** | |
| ***All fees must be paid prior to start date*** | |
| **Classes will commence on Wednesday, November 2, 2022 – December 14, 2022**  **Classes will meet weekly on Wednesdays from 7:00 pm – 9:00 pm** | |
| **Section B: Registrant Information** | |
| **Last Name: First Name: Middle Initial:** | |
| **Address (Mailing) City/Town Zip code:** | |
|  | |
| **Church Affiliation** | |
| **Name and address of church:** | |
| **Position (s) in church:** | |
|  | |
| **Telephone: Work: Cell:** | |
| **Email Address:** | |
| **Emergency Contact – Name: Relationship Phone:** | |
|  | |
| **Emergency Contact – Email Address** | |
| **Section C: Previous Courses** | |
| **Course Name** | **Course Date** |
|  |  |
|  |  |
| **Section D: Signatures** | |
| **Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_**  **Print Signature Date**    **Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Print Signature Date** | |
| ***Please complete registration form prior to beginning course (no later than one week prior to enrolment)*** | |
| ***Manager has final approval of all applicants*** | |
| ***This course will be canceled one week prior if minimum numbers are not met – all payments will be returned if canceled*** | |
| ***For Office Use Only:***  ***Accepted: Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_ If no, Reason for denial\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***    ***Dues Paid: Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_*** | |
| ***Additional comments:*** | |