

Auditor Registration Form

Personal Information

Full Name: _____

Address: _____

City: _____ Province: _____

Zip/Postal Code: _____ Country: _____

Email: _____

Billing/Mailing Address (if different from above):

Address: _____

City: _____ Province: _____

Zip/Postal Code: _____ Country: _____

Date of Birth: _____ Male: _____ Female: _____

Church Affiliation: _____

Method of Payment:

Cash Cheque (All cheques can be made out to **Great Lakes Bible College** memo) Credit Card

Name on Credit Card: _____

Credit Card #: _____ Expiration Date: _____

Cardholder Signature: _____

Course Selection

Course Name

Christian Home (Married Couples only)** _____
Jeremiah-Lamentations _____
Denom Teach & Practices _____
Spiritual Disciplines _____
Hermeneutics/Exegesis _____
Intertestamental Lit/Hist _____
Introduction to Biblical Studies _____
Leadership & Cong. Growth _____
Field Education _____

Short Course

Book of Isaiah _____

E-Learning

Jeremiah-Lamentations _____
Spiritual Disciplines _____
Leadership & Cong. Growth _____

* All audited classes are priced at **\$228.00/per person**

** This course is priced at **\$450.00/per couple**

Please state in the space provided what courses would you be interested in taking:
