

Williamson Bible Institute

A Mid-Atlantic Training Center

Student Registration Form

Name: _____

District Affiliation (Check one): Mid-Atlantic _____ Philadelphia _____ Other _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail: _____

Local Church: _____

Course #: _____ Course Name: _____

Professor: _____ Location: _____

Check One: Regular Class _____ Directed Study _____ Internship _____

Specify Semester and Year: Fall _____ Winter _____ Spring _____ Summer _____

This course will be for...

Ordination Education Credit (OEC) _____ Audit _____ CEU _____

This course will be for...

Elder Ordination _____ Deacon Ordination _____ Lay Certificate _____ Other _____

Are you a member of the Church of the Nazarene? Yes _____ No _____

Financial Statement

Course Tuition for Ordination Credit (\$145.00) _____
(includes directed study/internships)

Course Tuition for Audit/CEU only (\$65.00) _____

Scholarship Amount _____
(internship & directed study not eligible)

Scholarship Source _____

Adjusted Total _____

Amount paid today: \$ _____ Check # _____

Balance (if any) \$ _____ Date to be paid by _____

Signature: _____ Date: _____

Note: There is a \$20.00 fee that will be applied for any returned checks.