MIND MAKEOVER TRAINING REGISTRATION FORM

Name				☐ Male ☐ Female	<u> </u>
	(last)	(first)	(middle)	•	
Address	5				_
	(street address)				
	(city) (state)	(zip)			
E-mail A	Address				
Cell Pho	one	Work Phor	ne		
Home F	Phone	Other Pho	one		
	register me for the p DEPOSIT TO RESERV	following: /E YOUR SPACE AND EARLY	/ BIRD PRICE: \$20		
	E PRICE;				
		D (BEFORE SEPTEMBER 1, 2 AFTER SEPTEMBER 1, 2019			
•	REGULAR (AFIER SEFICIOIDER 1, 2019	j. \$200		
DATE(S) OF TRAINING (cho October 9-11, 201	ose one): 9 6:30 pm – 8:30 pm easter	rn standard time.		
	TOTAL \$	\$20 deposit = Ba	alance \$	Total Enclosed: \$	·
	_	Reserve your seat for t	_	•	
[serve your seat now to sec be in form of credit towar	•	•	
		All checks should be made	e payable to Promis	e Ministry Center.	
	Credit c	ards may also be used for p	ayment. Balance pa	iyable 2 weeks befo	ore class.
REGIST	RATION OPTIONS:				
1.	By mail:	_			
	~	rm and <i>payment</i> for trainir le to; Promise Ministry Cen	•	try Center, PO Box	8, Hopewell VA 23860.
2.	Online: https://promisemin	nistrycenter.com/mindset-r	makeover.		
CREDIT	CARD INFORMATION	ON			
Type of	Credit Card: Vi	sa	Discover		
Credit (Card Number		Ехр	o. Date S	Security Code
	on card:				

Promise Ministry Center. Phone: 804-452-7624. Email: info@promiseministrycenter.com