

Crossing Boundaries School of Ministry

In Partnership with Oral Roberts University Bible Institute

CLASS REGISTRATION FORM

I request that a place be reserved for me in the Crossing Boundaries School of Ministry Diploma program for the _____ Semester. Please register me for the following courses:

Tuition Cost Agreement (*Please check one*)

- As a student, I realize that the cost for each course is \$150.00 if paid at one time within the first two weeks (I am already enrolled in the school)
- As a student, I realize that the cost for each course is \$180.00 if paid in installments
 - Monthly installments - \$75 deposit within first two weeks and three remaining payments of \$35
- I just want to take the class for \$50 and will receive no credit for the class
 - Monthly installments - \$20 deposit and three remaining payments of \$10

Name

Date