

PTSL 2018 Registration Form

Name _____
Home Address _____
City/State/Zip _____
DOB (Required for CEU) _____
Day Phone _____ Email _____
Dietary Restrictions _____

Perkins Theological School for the Laity 2018 Registration

Advance Registration available through March 15, 2018. Register by March 15 for guaranteed meals.

By March 15

At the Door *(bring completed form with you)*

(Please indicate below which type of course or courses you will attend and which meals you wish to purchase.)

Thursday Half-Day Course	<input type="checkbox"/> \$35	<input type="checkbox"/> \$50
Friday All-Day Course	<input type="checkbox"/> \$75	<input type="checkbox"/> \$90
*Saturday All-Day Course	<input type="checkbox"/> \$75	<input type="checkbox"/> \$90
Saturday Half -Day Course	<input type="checkbox"/> \$35	<input type="checkbox"/> \$50
Friday Box Lunch	<input type="checkbox"/> \$15	<input type="checkbox"/> N/A
Saturday Box Lunch	<input type="checkbox"/> \$15	<input type="checkbox"/> N/A
Parking Permit Requested	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Due to new parking arrangements, we ask that you let us know if you need parking. One week prior to the event you will be sent a parking pass along with instructions.</i>		
CEU Registration <i>(if applicable)</i>	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25

***Please note:** If you choose to attend a Saturday All-Day Course, you will not be able to attend a Saturday Half-day Course.

First time attendees will receive a \$25 discount.

Sub Total \$ _____

Minus First time discount **-\$25.00**

Total Amount Due \$ _____

COURSE SELECTION (Please write in your preference)

Thursday Half-day Course _____

Friday All-Day Course _____

Saturday All-Day Course _____

Saturday Half-Day Course _____

PAYMENT

☐ Check payable to **Southern Methodist University**

☐ Credit card

Please charge my ☐ Visa ☐ MasterCard ☐ Discover

Name on Card _____

Account number _____

Expiration date (MM/YY) _____ / 3 digit security code _____

Billing Address (if different than above) _____

Billing City/State/Zip _____

Signature _____

1) Mail completed Registration form along with payment to:

ATTN: Mary Roberts
Office of External Programs
Perkins School of Theology-SMU
PO Box 750133
Dallas, TX 75275-0133

2) Fax completed form to 214-768-4245 (*with credit card payment information and signature*)

Should you need to cancel your registration, a full refund, minus a \$25 processing fee, will be given as long as Perkins Office of External Programs is notified in writing at least one week prior to the event. A cancellation request can be sent by email to: theoexternalprograms@smu.edu or by mailing a written note to Mary Roberts at the above address.