



Registration Form (2 Pages)

(Please Print Clearly) Registration \$50.00 - Per Semester or \$150.00 Per Year

Student Name _____

Address _____

Date of Birth _____ Male () Female ()

Telephone No. _____ Cell No. _____

E-Mail Address _____ SSN _____

Single () Married () Semester Year Enrollment _____ (Month & Year)

Program you are enrolling in: _____

Are You Requesting Certificate? () Diploma () Certificate () Degree ()

Are You Entering as an Audit non-credit student? Yes () No ()

List all subjects by Subject Code Number, which you are enrolling for:

- _____
- _____
- _____

What method are you requesting to pay for your program?

Full Payment () Installment Payments - Monthly ()

ADDITIONAL CONDITIONS:

1. I do understand that the Seminary charges an Administration Fee of \$8.50 (per month) and agree to make these payments - Yes () No ()

If unable to pay the monthly the Administration Fee, please explain why:

_____.

2. I do understand that there is a charge for correspondent mail - which will be billed to me each time books, notes, or other correspondence is sent to me, via USA postal mail.

3. I do understand that tuition cost does not include text books or NYCFGTS notes.

4. I do understand that one subject at a time is sent and completed by me in the correspondence program. When completed, the next subject is sent to me. In addition, payments must be up to date in order for me to continue in the correspondent program.

5. I do agree to the Cost Estimate Evaluation, and have Signed and Notarized.

My registration fee of **\$50.00** is enclosed for this semester

Signature Below and Date:

_____ Date _____

NOTARY: