

**Ministry of Prayer Auditing Registration and**

**Fees Form**

Class of 2025 - starts **June 2023**

**Auditing Tuition $3,000, $1,500/year**

Registration by May 15th 2023

Please submit this completed form to enroll in the Ministerial Training Auditing Program. All information you provide is kept confidential and is not shared without your consent.

**Contact information:** *Please type or print clearly using ink.*

Name (Last, First, MI) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_ Country \_\_\_\_\_\_\_\_\_\_\_\_

Day Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Auditing Option $3000 for the 2 year program:** Students who elect this option have access to all video and audio material, the monthly conference call dialogue with Darlene and the monthly conference call online with the instructor. Students who audit do not attend breathworks or the yearly retreat, do not have mentors, and are not required to complete the paper assignments. Students who audit do not receive ordination as Ministers of Prayer.

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| ❒ **Auditing only – Two installments:**  Pay full tuition ($1500) by May 15th of Year One, and pay another $1500 by May 15th of Year Two. |

❒ **Auditing only – Monthly installments:**

Auditing option can also pay automatic monthly fee of $136 if paying by credit card.

**Method of Payment for Tuition:**

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| ❒ | Check or Money Order *(Please make payable to: Center for Sacred Studies)* |
| ❒ | Credit Card, to be automatically run according to schedule of selected payment plan.  Visa / Mastercard *(please circle)*  Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3 Digit Code\_\_\_\_\_\_\_\_\_ Expiration Date \_\_\_\_\_\_\_\_\_\_  Cardholder’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Refund Policy**

If you decide to leave the program during the first program year, then you are obligated to complete the payment schedule for that year.

**Please initial you have read the above paragraph: \_\_\_\_\_\_\_\_\_\_**

For second year tuition, if you notify us of your decision to not continue the program by May 1 (BEFORE the commencement of the second year classes), then you may withdraw without any

further financial obligation. Once the second year program has begun, your payments remain payable for the remainder of the year in accordance with your selected payment option.

**Please initial you have read the above paragraph: \_\_\_\_\_\_\_\_\_\_**

We understand that circumstances may arise which could make it logistically challenging for you to continue the program. Your holistic wellbeing is an integral part of this program, and therefore it is our policy for withdrawing students to meet with our Educational Program Director, Susan Coleman, before exiting. Our policies are designed to clarify the commitment that you have with the Ministry Training Program..

**Please initial you have read the above paragraph: \_\_\_\_\_\_\_\_\_\_**

By completing and signing this registration, I attest that I have read and understand the payment and refund policies and that the information provided herein is true and correct.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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