

**Turner Theological Seminary**  
**127th FOUNDERS' CONVOCATION REGISTRATION**



**PLEASE PRINT:**

Name \_\_\_\_\_

Church \_\_\_\_\_ Office Held \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Fax \_\_\_\_\_ Today's Date: \_\_\_\_\_

Episcopal District (A.M.E.) \_\_\_\_\_

Seminary Graduate     Non Graduate     TTS Alumni

<u>QUANTITY</u>		<u>UNIT PRICE</u>	<u>TOTAL</u>
_____	<b>Registration Fee</b>	\$50.00	_____
_____	Alumni Dues	\$75.00	_____

**Subtotal** \$ \_\_\_\_\_

Method of Payment:

Cash       Check       Credit Card

***Please add \$5.00 processing fee if paying by credit card.      \$5.00***

**GRAND TOTAL:** \$ \_\_\_\_\_

**\*\*\*\*IF MAILING, PLEASE DO NOT SEND CASH.\*\*\*\***



Credit Card: # \_\_\_\_\_ Expiration (MM/YY) \_\_\_\_\_

Name on Card: \_\_\_\_\_ Zip Code \_\_\_\_\_ CV# \_\_\_\_\_

**MAIL TO: Turner Theological Seminary, 702 Martin Luther King, Jr. Dr., SW, Atlanta, GA 30314**

**OFFICE USE**

PAYMENT DATE: \_\_\_\_\_ CHECK NUMBER: \_\_\_\_\_

APPROVAL NUMBER (CHARGE CARD): \_\_\_\_\_ DATE: \_\_\_\_\_

PROCESSED BY: \_\_\_\_\_