

College of Biblical Leadership

1771 East Palomar St. Chula Vista, CA 91913
 Phone (619) 421-1100; Fax (619) 591-2262

Class Registration

PERSONAL INFORMATION

Last Name		First Name		Middle	
Address			City		State
Zip			Home Phone ()		Cell Phone ()
Work Phone ()			Date of Birth		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Email		Classification <input type="checkbox"/> Credit <input type="checkbox"/> Audit <input type="checkbox"/> Other _____			

CLASS REQUEST

Course #	Course Name	Units	Credit \$100 per unit	Audit \$25 per unit	Total
Payment plans are available. Student will need to meet with the Financial Office to establish a payment schedule prior to the first class.				Tuition Total	
				Fees	
				Grand Total	

PAYMENT PLAN

Payment 1		Payment 2		Payment 3		Payment 4	
Amount:		Amount:		Amount:		Amount:	
Due Date:		Due Date:		Due Date:		Due Date:	
Ck. #	Amt.	Ck. #	Amt.	Ck. #	Amt.	Ck. #	Amt.