



**2017 CHRISTIAN EDUCATION CONFERENCE**  
**February 6 & 7, 2017**  
**One Registration Form Per Institution**

Please ✓ one

- Early Registration Dates Nov. 01 to Nov. 30, 2016 ..... \$ 55.00 per person
- Later Registration Dates Dec. 01, 2016 to Dec. 31, 2016 ..... \$ 75.00 per person
- Final Registration Dates Jan. 01 to Feb. 6, 2017 ..... \$105.00 per person

\_\_\_\_\_ Phone: \_\_\_\_\_  
 Name of Institution

\_\_\_\_\_ Address

Name: \_\_\_\_\_ Title: \_\_\_\_\_ \$ \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ \$ \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ \$ \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ \$ \_\_\_\_\_

**Registration Total \$ \_\_\_\_\_**

**PAYMENT METHOD**

**CREDIT CARD:**

- Corporate Card    Personal Card
- Credit    Debit
- VISA    Master    Discover    American Express

Name on Card: \_\_\_\_\_

Billing Address on card: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CV Code \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

(Must be authorized signer on credit card)

**CHECK: # \_\_\_\_\_ Attached and mailed in with form. \_\_\_\_\_**  
 Signature

**THE COUNCIL OF PRIVATE COLLEGES OF AMERICA**  
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