

ACADEMY FOR VITAL CHRISTIANITY
REGISTRATION SPRING 2009-2010

MY PERSONAL INFORMATION

Name _____

Address _____

City/ST/Zip _____

Preferred phone _____

E-mail _____

Are you affiliated with a particular denomination? ____ Yes ____ No

If yes, please list _____

Education level ____ Some college ____ Bachelor ____ Seminary degree ____ Other degree

MY CLASS CHOICES

Interpreting the Older Testament
_____ \$190 (includes lunch)
_____ \$240 (after February 13, includes lunch)

Our Neighbors of Other Faiths
_____ \$175
_____ \$225 (after April 5)

Reading the Gospels Today
_____ \$190 (includes lunch)
_____ \$240 (after March 13, includes lunch)

Reading the Prophets in the 21st Century
_____ \$190 (includes lunch)
_____ \$240 (after March 6, includes lunch)

The Spiritual Lives of Children and Youth
_____ \$190 (includes lunch)
_____ \$240 (after March 6, includes lunch)

Wrestling with the Problem of Evil & Suffering
_____ \$175
_____ \$225 (after March 30)

Total Enclosed \$ _____

Make checks payable to United Theological Seminary.

Please indicate if you have any special dietary needs:

_____ Visa _____ MasterCard

Number _____ - _____ - _____

Expiration date ____ / ____

Signature _____

Please print your name as it appears on the card

Please return completed form to:

Susan Hastings, Registrar
United Theological Seminary
3000 Fifth Street Northwest
New Brighton, MN 55112-2598
651.633.4315 (fax)
shastings@unitedseminary.edu

Please direct questions to:

Renee K. Flesner
Community Programming Assistant
rflesner@unitedseminary.edu
651.255.6138

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