New Thought Colorado llc
Registration Form

474 Bismarck Street | Grand Junction, Colorado 81504
303.358.0069 | RevCarlaRyan@gmail.com

Today's Date

TERM: Winter / Spring / Summer / Fall of 20____

Student Information

Last Name:																									
First Name:																									
Address:																									
City:															**State:**				**Zip:**						
Phone:				-				-					**Cell:**				-				-				
Email:																									

Course Selection & Tuition—Page 2

Relationship Courses			($75/semester unit)	
	104	**Creating Healthy Boundaries for Life & Freedom** 16 class hrs / 1 semester unit	**8 weeks**	**$ 75--**
	204	**5 Love Languages** 15 class hrs / 1 semester unit	**6 weeks**	**$ 75--**
Self-Awareness Courses				
	106	**Intentional Living** 16 class hrs / 1 semester unit	**8 weeks**	**$ 75--**
	107	**The Art of Being** 15 class hrs / 1 semester unit	**6 weeks**	**$ 75--**
	205	**Healing Power of Forgiveness** 15 class hrs / 1 semester unit	**6 weeks**	**$ 75--**
	307	**Exploring Mysticism** 30 class hours / 2 semester units	**10 weeks**	**$ 150--**
	402	**Masks of Ego. Faces of God.** 30 class hrs / 2 semester unit	**12 weeks**	**$ 150--**
Special Topics & Workshops				
	PS238	**Ancient Worship of the Great Goddess** 15 class hrs / 1 semester unit	**6 weeks**	**$ 75--**
	W1000	**Funeral Planning Workshop** fee includes workbook	**2 hours**	**$ 25--**
	W1001	**Prayer & Meditation Workshop** Fee includes materials/handouts *Required by T&M 201 students.*	**3 hours**	**$ 35--**

Please check this box if the address information above has recently changed. ☐

Check this box if you are taking this course for credit toward a degree or certification. See tuition due. ☐

Check this box if you are attending this course for spiritual community and personal satisfaction. Love offering basis. Payment for materials may be requested. ☐

Registration/Payments

Paid today: $ _____

Cash ☐ Check ☐ Check # _____

Total PAID: $ _____

Per the policies and procedures, I understand that the tuition listed includes a **$25** class deposit and that it is non-refundable and non-transferable to other classes or students. I have been given a copy of these registration policies and, with my signature below, accept the conditions as stated.

_____
Name/Signature Date

More Courses on page 1

Copies of this form will be provided to: 1. Student 2. Instructor 3. Records (original)