

**1. Course Information**

Name: Financial Peace  
 Date(s): Aug. 26- Nov 18, every Thursday  
 Time: 6:30-8:30  
 Location: Applied Science 112  
 Cost: \$259 (includes materials)  
 CEU: (Four) 4 Continuing Education Units (CEUs)

**2. Registration Information**

Name: \_\_\_\_\_  
*(As you would like for it to appear on a certificate -- Please PRINT clearly)*  
 \*Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \*Phone: \_\_\_\_\_  
 \*Fax: \_\_\_\_\_  
 \*Email: \_\_\_\_\_

**3. Payment Information**

Type:  Cash  Check *(\*Make check to Liberty Univ. with "Financial Peace" in Memo area.)*  
 Credit/Debit card  Purchase Order *(P.O. number: \_\_\_\_\_)*  
 Credit Card: \_\_\_\_\_ Name on card: \_\_\_\_\_  
 Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Center for Professional and Continuing Education  
 DeMoss Hall 2016  
 Liberty University  
 Lynchburg, VA 24502  
 Ph: 434-592-4718

Fax: 434-582-2297

Office Use Only:  
 Date Fee Received \_\_\_\_\_  
 Certificate Made \_\_\_\_\_  
 Certificate Delivered/Mailed \_\_\_\_\_

	<b>Sub-Total</b>		
	_____% Contingency (Inflation/unexpected expenses)		
	<b>Total Expenses (A)</b>		
*If you wish to have non-member accident insurance, contact the Central Service Center.			
	<b>Event Fee:</b>		
		<b>Estimated Fee:</b>	<b>Actual Fee:</b>
Fee:	Total Expenses (From line A above)		