

## East Texas Baptist University

## Business Office/Financial Aid/ Registration Form

Name			
First	Last	Middle	
Last Four Digits of Social Securit	.y No	_	
Address			Phone
			Street
		Email	
City	State	Zip	
Site Location:		Date:	
Have you completed and paid(\$	(25) for your adm	nission's application	a? [ ] Yes [ ] No
Have you applied and been awa (Must complete an "Initial" scholarship a			
Tuition (one term)		With Scholarship \$ 175.00	Without Scholarship \$175.00
Ministry Scholarship (if awarded	d-\$50 per term)	50.00	<u>-0-</u>
Balance		<u>\$ 125.00</u>	<u>\$175.00</u>
Miscellaneous			
TOTAL		======	=====
Payment Method		_ Amount Paid _	
	Statement o	of Responsibility	
I understand that completion of the regist will be covered by the policies stated in t account becomes delinquent and all meth over to a third-party collector. It is the postudent account.	the catalog. I agree to hods of collection hav	o pay all charges on or be we been exhausted by the	efore the due dates. If my student University, the account may be turned
I certify that the information contained in the information contained in this form. I to scholarship donors.			
Student Signature		Da	nte
		For Office	Use Only
		Fall Mini-t	