



GP



STUDENT ENROLLMENT FORM

Name _____ Phone: _____ - _____ - _____
FIRST LAST

Prefiero este curso en español.

Complete Mailing Address

STREET OR P.O. BOX

CITY

STATE ZIP CODE

Please Circle: Male or Female Date of Birth _____

Are you now, or have you ever been involved in a church: _____

If so, please explain: _____

How were you referred to Crossroad Bible Institute? _____

STUDENT COMMITMENT

By signing this agreement, I promise to faithfully complete each course that I start in a timely manner. I know that the *Great Truths of the Bible* course consists of 12 lessons, 12 themes, and 12 Straightway Roadmaps—all carefully selected to bring into focus 50 truths of the historic Christian faith. **I want to be held accountable to this commitment because I want to grow spiritually.**

Student's Signature: _____ Date: _____

CROSSROAD BIBLE INSTITUTE COMMITMENT

We hereby promise to faithfully administrate this course in a timely manner, to encourage you and challenge you in your studies, and to provide you with certificates of completion. In addition, upon graduation we will send you a letter for your file indicating the effort that you have put forth in this course.

Crossroad Bible Institute Staff

When this form is completed, please return it to Crossroad Bible Institute.
Your first Bible study lesson will be sent to you.

CROSSROAD BIBLE INSTITUTE

P.O. BOX 900 • GRAND RAPIDS, MI • 49509-0900 • PH 616-530-1300