

# Christian Life Educators Network

6171 Gateway Rd., Columbus, GA 31909 • 706-323-0847

## Application for Membership



### School Information

School Name		Application Date	
School Street Address		City	State/Province
			Zip/Postal Code
Mailing Address		City	State/Province
			Zip/Postal Code
Shipping Address <i>(Must be street address, not a Post Office Box)</i>		City	State/Province
			Zip/Postal Code
School Phone	Fax	E-mail Address	Website

### Administrative Information

Name of Chancellor <i>(Please Print Clearly)</i>	Chancellor's Cell Phone	E-mail Address
Name of Dean	Dean's Cell Phone	E-mail Address
Name of Administrator	Administrator's Cell Phone	E-mail Address

### Financial Information

<input type="checkbox"/> CLEN Membership Non-refundable Fee: \$500.00. (\$250 Annual Renewal Fee) Check is enclosed, or use credit card info below:		
<input type="checkbox"/> I will pre-pay for course materials with a check no less than four weeks prior to the start date of each class, or use credit card info below:		
Credit Card Type:	Credit Card Number	Expiration Date / and CCV code
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
Name on Credit Card	Cardholder's Billing Address	
Authorized Signature	Date	