

FULL-TIME MISSIONARY DISCOUNT

APPLICATION

Name _____

Child's Name and grade Level _____

Church Name _____

Church Address _____

Church Phone _____

(Verification information (Include the name of the person who can verify your missionary status.)

Name of Contact _____

Title _____

Phone _____

My signature below verifies that I am a full-time missionary and am eligible to receive a 100% tuition discount. If my status changes and I am no longer a missionary supported by Orlando Baptist Church, I understand that I must notify Orlando Christian Prep immediately. If I do not, I understand that I not only will lose the tuition discount but also will be responsible to pay the 100% discount received retroactive to the point of my leaving full-time missions work.

I state that the information on this form is true and correct.

Must be signed in the presence of a notary.

Signature

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____ (name of person above), who is personally known to me or who has produced _____ (type of identification).

Notary Signature _____ Notary Seal: