



Authorization to Charge Form

Event Name: **School of Spiritual Direction** OR **NextStep School of Spiritual Direction**

Sponsored By: NewWay Ministries MONTH/YEAR APPLIED FOR _____

Location: Glen Eyrie Conference Center OR The Cove
Colorado Springs, CO Asheville, NC

	Individual	or	Couple
Tuition and Lodging:	\$2,365.00 per person		\$4,730.00
Single Room (if applicable):	\$ 365.00 per person		N/A
Total Cost:	\$ _____		\$ _____
Previous Amount Paid:	\$ _____		\$ _____
Remaining Balance to be charged:	\$ _____		\$ _____

Please charge the following amount to my credit card on the following date/s:

Charge \$ _____ Date to Charge _____
 Charge \$ _____ Date to Charge _____
 Charge \$ _____ Date to Charge _____
 Charge \$ _____ Date to Charge _____
 Charge \$ _____ Date to Charge _____

NOTE TO NewWay Ministries Staff:

Please use the following credit card;

Name as appears on card: _____

Credit Card # (Visa, MasterCard or Discover ONLY): _____

Expiration Date: _____ 3-Digit Security Code: _____ Billing St. Address Number: _____

Billing Zip Code: _____ Student Name (if different than Name on Card): _____

Signature: _____

FAX back to 970.468.9696 (secure office space) or scan and email to andi@newwayministries.org

Internal Use Only:

Charged \$ _____ Date Charged _____
 Charged \$ _____ Date Charged _____
 Charged \$ _____ Date Charged _____