

# Total Health Seminar

Indianapolis Training Center—November 17-21, 2008

Mr.  Mrs.  Miss  Dr.  Rev.  Pastor  M.D.  Other \_\_\_\_\_  
Name: Last \_\_\_\_\_ First \_\_\_\_\_  
(if attending) Spouse's First \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Spouse's Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_  Alumnus  First-Time  
of Health Attendee  
Seminar  
E-Mail Address \_\_\_\_\_

*Providing your e-mail address will enable us to notify you of future seminars in your area, ministry reports, and other special offers.*

Health Needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Past Treatment, Including Medication: \_\_\_\_\_

Special Needs: \_\_\_\_\_

Current Medication(s): \_\_\_\_\_

Supplements: \_\_\_\_\_

Dates of Basic Seminars Attended: \_\_\_\_\_

Are you a member of ATI? \_\_\_\_\_ Number of Years: \_\_\_\_\_

Name of Church You Attend: \_\_\_\_\_ Member:  Yes  No

Have you Been Anointed by Elders?  Yes  No (Explain): \_\_\_\_\_

## Payment

The total cost for this seminar, including housing, accommodations, and meals from Monday evening through Friday noon, is \$985 for one attendee; \$400 for accompanying spouse. Alumni may attend for \$485; \$200 for accompanying alumnus spouse.

Check/money order # \_\_\_\_\_ (made payable to IBLP)

Bill my credit card:  VISA or  MasterCard (Will be charged to Institute in Basic Life.)

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. \_\_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

<b>First-Time</b>	
\$845.00	Meals/materials/sessions/testing
\$140.00	Housing
_____	
\$985.00	Total
\$400.00	Accompanying spouse

<b>Alumni</b>	
\$345.00	Meals/materials/sessions/testing
\$140.00	Housing
_____	
\$485.00	Total
\$200.00	Accompanying spouse (Alumni)

Please fax this application to 630-323-7271 or send it to Total Health Seminar, IBLP, Box One, Oak Brook, IL 60522. For more information, visit [www.iblp.org/totalhealth/](http://www.iblp.org/totalhealth/), call 630-323-9800 ext. 521, or e-mail [totalhealth@iblp.org](mailto:totalhealth@iblp.org).