



*Bronner Business Institute*  
**Entrepreneurship Training Institute**



**L E V E L REGISTRATION FORM**

**SECTION I. CONTACT INFORMATION**

Name: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. & Mrs.		Business Name:	
Home Address: _____		Your Title: _____	
City: _____ State: _____		Business Address: _____	
Zip: _____		City: _____ State: _____	
Church: _____		Zip: _____	
Home Phone: ( ) _____		Web: _____	
Mobile Phone: ( ) _____	Work Phone: ( ) _____	Business Phone: ( ) _____	
Fax Number: ( ) _____	E-mail Address: _____		

**SECTION II. PERSONAL PROFILE**

<b>1. Gender</b> { } Male { } Female	<b>2. What is your age?</b> _____
<b>3. What is your ethnic background?</b> { } African-American { } Hispanic { } Asian-American { } Caucasian { } Native American { } Other (Specify) _____	
<b>4. Which category best describes your formal years of education?</b> { } Elementary/Secondary { } High School Graduate { } Some vocational/trade { } Vocational/trade grad { } Some college { } A 2-year college grad { } A 4-year college grad { } Post graduate college	
<b>5. Including yourself, how many people are in your household?</b> _____	
<b>6. Are you the primary income earner in your household?</b> { } Yes { } No	
<b>7. What was your gross annual income last year from all sources?</b> _____	
<b>8. What is your present occupation?</b> _____	
<b>9. Do you or have you previously owned/operated a business?</b> { } Yes { } No	
<b>10. Which section best suits your schedule?</b> { } Mon. 6-9pm (Classes begin 9/6)	

**SECTION III. INFORMATION ABOUT YOUR BUSINESS**

<b>1. Do you have a specific business in mind?</b> { } Yes { } No
If yes, describe your business idea in ten (10) words or less:  _____
<b>2. Who recommended that you take the course?</b> _____

*(complete both sides)*

## SECTION IV. PAYMENT INFORMATION

The cost of the course is **\$700.00**, payable to **Bronner Business Institute** in one total payment or two half-payments. Full payment or the first partial payment must be submitted with this registration form. Any remaining balance is due no later than **August 22, 2010**.

### BBI CHAMP DISCOUNTS AVAILABLE

- GOLD CHAMP Discount: 25% (Cost: \$525.00)
- SILVER CHAMP Discount: 10% (Cost: \$630.00)

DATE: _____	AMOUNT: \$ _____
Method of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check/Money Order # _____	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> AMEX	
Card No.: _____	Exp. Date: _____
Name on Card: _____	Code: _____
Signature: _____	Date: _____

DATE: _____	AMOUNT: \$ _____
Method of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check/Money Order # _____	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> AMEX	
Card No.: _____	Exp. Date: _____
Name on Card: _____	Code: _____
Signature: _____	Date: _____

### Refund Policy

All requests for refunds must be submitted in writing and received at least fifteen (15) days prior to the start of class. Refunds are payable within fourteen (14) business days after receiving the request. However, course materials are ordered and shipped to Bronner Business Institute, therefore, a \$50 non-refundable book restocking fee will be retained by the organization. The book is not the property of the refunded participant. Once a participant receives material and/or attends a NxLevel™ class session, no refunds are made. However, if it becomes necessary for you to withdraw from the course for any reason, BBI will work with you at a later date to complete your course for a re-enrollment fee of \$250.

### Returned Check Policy

Any participant who has a check to BBI returned due to insufficient funds or closed accounts will be assessed a \$25.00 charge.

## SECTION V. PARTICIPANT COMMITMENT

I hereby register to take the Business Plan Basics: NxLevel™ for Micro-Entrepreneurs class. I'm serious about taking my business or idea to the next level and acknowledge that I have read and understand the above policies regarding payments.

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

Date: \_\_\_\_\_