



## EVERY MAN'S BATTLE FOR PURITY REGISTRATION FORM

Please fill in **ALL** boxes and **PRINT** all information

(Check one) <input type="checkbox"/> The Battle <input type="checkbox"/> Purity Boot Camp <input type="checkbox"/> Purity Platoon <input type="checkbox"/> Maturity Platoon			
Today's Date:		Battle Location:	
Home Church:			
First Name:	Last Name:		Wife's Name:
Address:			
City:	St	ZIP:	
Home Phone:		Cell Phone:	
Home Email:			
Work Email:			
(Check one) <input type="checkbox"/> Single <input type="checkbox"/> Married			
(Check one) Age: <input type="checkbox"/> Teen <input type="checkbox"/> 20s <input type="checkbox"/> 30s <input type="checkbox"/> 40s <input type="checkbox"/> 50s <input type="checkbox"/> 60s			
(Check one) Shirt Size: <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL			
(Check one) Amt Pd: <input type="checkbox"/> <b>Adult-\$45 (Battle, PBC, PP, MP each)</b> <input type="checkbox"/> <b>Student-\$30 (Battle, PBC, PP, MP each)</b>			
(Check one) Payment method: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card			
(Check one) Credit Cd Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> AMEX			
Credit Card Number:			
CVV* (3 digits or 4 digits (AMEX):		Expiration Date:	
Scholarship/Amt: <input type="checkbox"/> Yes _____		Scholarship Authorization:	
Every Man's Battle For Purity Veteran <input type="checkbox"/> Yes Battle Year _____			

\*Where is the CVV Number? It is the last 3 digits AFTER the credit card Number on the back of your MasterCard & Visa cards. It is the last 4 digits ABOVE the credit card Number on the front of your AMEX card..

Mail registration to:  
NCFP • P. O. Box 621  
Osseo, MN 55369