



# POWER

**PERSONAL GROWTH • ORDER • WISDOM • ETHICS • RESPONSIBILITY**

## Class Application

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you find out about our program? \_\_\_\_\_

Alternate Contact Person's Name  
(Relative, Friend, Neighbor, Etc.)

\_\_\_\_\_  
Alternate Contact Person's Telephone  
(Cell number is okay)

Please tell us about your family:

How many children do you have? \_\_\_\_\_

What are their ages? \_\_\_\_\_

Do they live at home with you? Yes  No

Are any grandchildren living with you? Yes  No

POWER is a Bible-based, 9-week course.

Are you willing to commit to two days a week for nine weeks? (Monday & Wednesday, 9:00 A.M.–12:00 P.M.)

Yes  No

Are you comfortable learning life-management, job, and education strategies from a Biblical perspective? Yes  No