

ANDERSONVILLE THEOLOGICAL SEMINARY

***ONSITE GRADUATION NUMBER OF
GUESTS ATTENDING FORM FOR THE
May 25, 2018 GRADUATION***

Student's name as you want it to appear in program:

Email address: _____

Phone number: _____

**Approximate number of guests graduate is bringing to
graduation: Adults _____ Children _____**

**Remember you are allowed to bring as many guests as
you would like.**

**Please remember it is better to overestimate the number
of guests you will be bringing than to underestimate so
that ATS will have enough programs for all graduates,
singers, staff, and guests.**

Thanks

ATS

Please email this form to

finance@andersonvilleseminary.com

Or fax to 1-229-336-7000.

You may also mail form to:

ATS

PO Box 545

Camilla, GA 31730