

**REQUIRED SIGNATURES PAGE**

**Summer 2024**

Please attach this form to your online registration or submit via email when complete. All required signatures must be obtained, or your registration will not be complete.

COSS email: [cosss@smu.edu](mailto:cosss@smu.edu)

Student Name: \_\_\_\_\_ Student E-mail: \_\_\_\_\_

Annual Conference: \_\_\_\_\_ District: \_\_\_\_\_ Church: \_\_\_\_\_

**Courses Attending (check one):** Session I \_\_\_\_\_ Session II \_\_\_\_\_ Both Sessions \_\_\_\_\_

**List the Course(s) you are enrolling in**