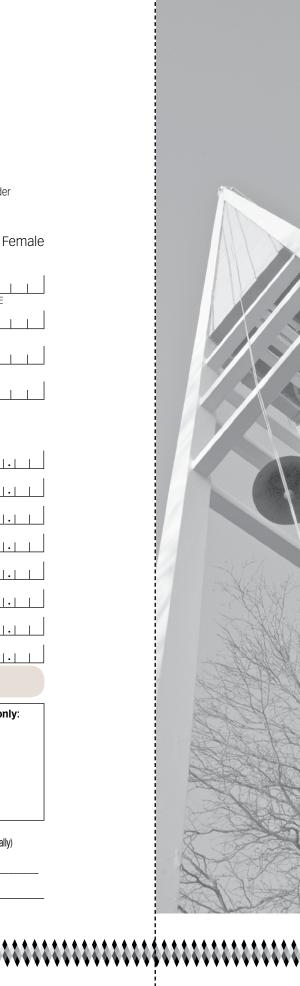
REGISTRATION FORM

Schoolcraft College

Continuing Education

₹ Professional Development

Registration/Admission Form | Spring/Summer 2018 Please use one registration form per student. Duplicate this form as needed. 1. Are you Hispanic? ☐ Yes ☐ No 2. Please select one or more races: Before registering, notify the college of any change to name, address or phone number(s). Entering new contact information on your registration form does **not** automatically update your record. Changes must be submitted on a Personal Data Change Form which ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American □ Native Hawaiian or Other Pacific Islander can be found in the FAQ section of our web site. □ White OR ○ Male ○ Female DATE OF BIRTH STUDENT NUMBER SOCIAL SECURITY NUMBER Returning students only need to include the last 4 digits. To be assigned to first-time students LAST NAME NUMBER AND STREET STATE ZIP CODE **EMAIL ADDRESS** DAY PHONE CES, CES2, **Title of Class** Section No. **Amount** CESN No. \$ \$ \$ \$ \$ \$ \$ Are you 60+? See Senior Adult Tuition Policy on page 45. TOTAL: \$ If registering for a Physical Fitness class, review waiver online at www.schoolcraft.edu/cepd/register before registering. Your registration signifies agreement to the waiver terms. Mail to: Company-paid tuition: For office use only: Please send a copy of your purchase order when you register. Schoolcraft College Co. Name Registration: CEPD 18600 Haggerty Road Co. Address Livonia, MI 48152-2696 Billing Contact Person Enclosed is my Check/Money Order payable to Schoolcraft College (if your check is returned because of insufficient funds, we may redeposit it electronically) Charge to VISA/MC/Discover/AMEX No._ Exp. Date



Signature required for charge card payment