Chesapeake College

Registration Form for Continuing Education and Workforce Training Courses

July 2004 to January 2005

Mail/fax form to: Chesapeake College, Business Office, P. O. Box 8, Wye Mills, MD 21679.
410-822-5400, 410-758-1537, 410-228-4360, ext. 5850, or call 410-827-5850 • Chesapeake College Web site: www.chesapeake.edu
Continuing Education and Workforce Training Web site: www.chesapeake.edu/continuing.edu/ • Fax: 410-827-5852.

(INFORMATION MUST BE COMPLETE IN ORDER TO PROCESS REGISTRATION.)

Name: _____ _____ _____
Last First Middle

Address: _____ _____ _____ _____
Street City State Zip

County of Residence: _____ Date of Birth: ____ ____ ____ Senior Citizen (60 or older): ☐ Yes ☐ No Sex: ☐ Female ☐ Male

Social Security No.: _____ Telephone Home: _____ Work: _____

E-mail address _____

Racial/Ethnic Origin: (Circle One) Hispanic/Latino Black/African American American Indian/Alaska Native Asian (Pacific Islander) White Foreign (International Student/Non-Resident Alien) Unknown

_____ _____
Student's Signature ***Date***

Caroline, Dorchester, Kent, Queen Anne's & Talbot county residents are in Chesapeake College's service area.
Other Maryland county residents add $5.00. Out-of-state residents add $10.00. Not applicable to CES, AFC, SWM and FTW courses.
SENIOR CITIZENS MUST PAY CES, AFC AND FTW TUITION, AND FEES.

Please fill in course information below:

Course No.	*Section*	*Title*	*Tuition*	*Fees*	*Total*
				TOTAL	

Method of Payment: ☐ Check ☐ Money Order ☐ Credit Card

If payment is made by credit card, information may be faxed to: 410-827-5852.

MAKE CHECKS PAYABLE TO CHESAPEAKE COLLEGE (Do Not Mail Cash!)

Charge my tuition to: (Check One) ☐ VISA ☐ MasterCard ☐ Discover Card Card Number: _____

Expiration Date: _____ Cardholder's Name: _____

Authorized Signature _____ Date _____

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