

Registration Form

Please Print Neatly

(Last Name) (First Name) (MI) (Classification)

(Street Name) (State) (City) (Zip)

(Card Number) (S.S. Number) (Daytime Ph. #) (Evening Ph. #)

(E-Mail Address)

	<u>Course Code</u>	<u>Course Title</u>	<u>Day</u>	<u>Times</u>
1				
2				
3				
4				
5				

Carefully Review this checklist before completing this form.

1. Make sure that the phone numbers you supply are correct.
2. In the event that you move please notify the apprenticeship as soon as possible with address and phone number changes.
3. Please make sure that you can attend the class that you sign up for. Review the calendars and make sure that the dates that you select do not conflict with other important dates.
4. Please make sure that the classes you select do not conflict with each other.
5. Please pay attention to the necessary pre-requisites and try not to register for classes out of order.
6. Leave some time between classes. Remember that the listed times required are approximate and may be slightly longer or shorter.