

# Registration Form



**CONTACT INFORMATION** [This section is mandatory. Please complete each line.]

Name: \_\_\_\_\_  M  F  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**In order for us to attribute your credit properly, please provide one of the following:**

Last 4 digits of SSN: \_\_\_\_\_ OR JFKU Student ID #: \_\_\_\_\_

**DISCOUNTS:** If you are eligible for a discount, please check the appropriate box below and deduct 10 percent from your course fees. Please note: discounts cannot be combined.

**JFKU Affiliates:**  Alumni  Student  Faculty  Staff

School: \_\_\_\_\_ Year Grad: \_\_\_\_\_ Department: \_\_\_\_\_

**General Public:**  Multicourse  Group Group Members: \_\_\_\_\_  
 \_\_\_\_\_

**How did you learn about CE?**

Catalog  Reminder  Alumni  Colleague/Friend  JFKU Website  CPA  
 JFKU e-mail  JFKU Flyer  APA  Other (please specify): \_\_\_\_\_

**Please enroll me in the following courses:**

TITLE	COURSE #	DATE	LOCATION*	\$	DISCOUNT \$

\*For Location, enter: **PH** for Pleasant Hill, **C** for Campbell, **B** for Berkeley, **OC** for Off Campus.

**NOTE:** Do not use this form to register for ONLINE courses. Please visit [www.jfku.edu/ce/online/](http://www.jfku.edu/ce/online/) for more information.

**Today's Date:** \_\_\_\_\_ **Total Fees:** \_\_\_\_\_

**Payment:**  Check  Visa  MasterCard  American Express  Money Order

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_