

COMMUNITY EDUCATION REGISTRATION FORM

STUDENT NUMBER	LAST NAME	FIRST NAME	MI
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STREET ADDRESS	CITY
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STATE	ZIP	EMAIL
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Please check if you are a SENIOR Citizen (60 or older)

 BIRTH DATE (To verify ADULT/SENIOR status)

-	-
MM	DD
-	-
YYYY	YYYY

 GENDER
 M F

HOME PHONE	WORK PHONE	CELL PHONE
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Your registration should include a local telephone number.

COURSE NUMBER	COURSE TITLE	START DATE	START TIME	LOCATION	FEE

Additional \$12 per course for non-Virginia Beach Residents _____
TOTAL _____

PAYMENT METHOD:
 CASH - *Bills over \$50 not accepted*
 MONEY ORDER
 CHECK—*Payable to ALC*
 DISCOVER
 MASTERCARD
 VISA

PRINT Cardholder's Name (as it appears on card) _____

Card Number _____ - _____ - _____ - _____ Exp. Date ____/____

Cardholder's Signature _____ Three Digit Security Code _____
(from back of card)

WITHDRAWAL/TRANSFER POLICY: Student-initiated transfers and withdrawals will be assessed a \$15 processing fee. Withdrawals must be submitted in writing five days before the class start date to be eligible for refund. Allow two weeks for processing. No refunds are issued once class has started or if you fail to attend class.

OFFICE USE ONLY

Office Receipt Number _____ Amount Paid _____ Initials _____ Date _____

Check ___ Credit Card ___ Cash ___ Money Order ___ Bookkeeper Receipt Number _____