

HCC Continuing Education REGISTRATION FORM



Housatonic Community College
 Continuing Education
 900 Lafayette Boulevard, BH - 274
 Bridgeport, CT 06604
 Phone: (203) 332-5057
 Fax: (203) 332-8558

REFUND POLICY

Students who withdraw, in writing, from any course 72 hours or more before the class meets will receive a full refund. **No refunds will be allowed once the class has begun.**

It only takes 4 easy steps to register. After completing these steps, you may drop off the form at the Center for Continuing Education, or mail, or fax it (see above for mailing address and fax number). **If you have any further questions or need additional information, call (203) 332-5057.**

STEP 1

Last _____ First _____ Middle Initial _____

Street Address or PO Box _____

City _____ State _____ Zip _____

Social Security Number _____ Date of Birth _____

Telephone _____ Cellphone _____

Email Address _____ Today's Date _____

STEP 2 Check appropriate boxes 1 through 6.

1. Citizenship Status:
 U.S. Citizen
 Not a U.S. Citizen
 Permanent Resident

2. Gender:
 Male
 Female

3. Please indicate the race(s) you consider yourself to be:
 10. White
 20. African American
 45. Asian
 50. American Indian/Alaska Native
 80. Native Hawaiian/other Pacific Islander
 60. Choose not to respond
 90. Other Race: _____
(please print)

4. Ethnicity:
 Hispanic/Latino
 Non-Hispanic/Latino
 Choose not to respond (none)

5. Have you previously taken any courses at a CT community college?
 Yes (if applicable, please enter your Banner ID at the end of this application)
 No

6. How did you hear about us?
 Newspaper/Magazine Ad
 Radio Ad
 Facebook
 Google
 Other: _____
(please print)

STEP 3

CRN#	List Course Title You Are Registering For:	Start Date:	Fees:
TOTAL DUE:			

STEP 4 Please choose your payment method:

<input type="checkbox"/> I will be paying with a credit card Accepted if payment is made by mail, fax, phone, or in-person. Please select which card you are using. <input type="checkbox"/> VISA Card Expiration Date: [] [] - [] [] <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER Card Number: [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] Signature: _____	<input type="checkbox"/> I will be paying with check/money order Accepted if payment is made by mail or in-person. Please make checks and money orders payable to: Housatonic Community College Check/Money Order # _____ Amount enclosed : _____ <hr/> <input type="checkbox"/> I will be paying with cash Accepted if payment is made in-person only. Note: Students must register in the Center for Lifelong Learning (Beacon Hall Room 274) before bringing cash payments to the Business Office in Lafayette Hall.	OFFICE USE ONLY Stamps and Validation
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Banner ID Number: [] [] [] [] [] [] [] [] (First-time registrants please leave blank)