## **REGISTRATION FORM** MONTGOMERY Please Print Clearly Workforce Development & Continuing Education COIL .EGE All information is required. Incomplete forms will be returned to the student unprocessed. For registration assistance call 240-567-5188. FAX completed registration form with credit card information to 240-567-1877 or 240-567-7937. Mail completed registration form with payment to WD&CE Registration, 51 Mannakee Street, CC 220, Rockville, MD 20850. **College ID Number:** Birthdate Sex Female Male 2 M Month Day Year Middle Initial Last Name **First Name**

L																				
H	House # and Street Name (Do NOT use P.O. Box or you will be charged Non-Md. resident fee.) Apt. #																			
City												State		Zi	р			-		
Home Phone										/ork hone										
Fax									] е·	-Mail										
Have you attended MC before? Sea No If you have ever taken a credit class at MC and the last class (credit or non-credit) you took at MC was more than 4 years ago, you must also complete and submit a Student Reactivation form found at: http://www.montgomerycollege.edu/studentforms.										/ou										
How did you hear about us? □Received brochure in mail □Website □Social media □Advertisement □On campus □Other																				
Military: If the military is paying for your course(s), you must submit the ast 4 digits of your SSN. STUDENTS WITH DISABILITIES If you need support services due to a disability, call Workforce Development & Continuing Education at 240-567-4118 at least three weeks before class begins.																				
ETHNICITY: Choose one. ( <i>Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.</i> )																				
RACE: Choose all that apply, you may choose more than one. (Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.) American Indian or Alaskan Native Asian Black or African American Native Hawaiian and other Pacific Islander White																				
U.S. Citizen Permanent Resident (Circle one: Green Card / Working Card)																				

## CHECK ALL THAT APPLY:

Address

□ I have been a Maryland resident [as defined in the Montgomery College Catalog] for at least three months.

I am 60 years of age or older. (Applicable to designated tuition waiver courses for Maryland residents only.)

I am a Maryland National Guard member enlisted for at least a 24 month period and submitting proof of such from the adjutant general's office.

CRN #	Course #	Course Title	Start Date	Tuition Course Fee		Non-Md. Fee	Course Total		
Code: GT	Refunds will go to the registered student of record. Total Due \$								

I certify that the information on this registration is correct and complete. I am aware of and will adhere to College policies as published in the Student Handbook. I understand that non-attendance and/or failure to file all registration changes in writing with the Admissions and Records Office does not relieve me of responsibility for tuition and fee charges incurred. I agree to abide by the policies and procedures of the College, including without limitation, the Student Code of Conduct and any payment liabilities. I hold the College harmless for any errors I have made that may affect a request for a subsequent refund or academic appeal.

Student Signature Requi	red	·····	Date
Please indicate payme	nt by: Check (payable to Credit Card Information:	<b>o y o y</b>	Credit card:  MasterCard  VISA  Discover
NOTE: Credit card information will	Credit Card Number		Month / Year
be detached and disposed of promptly and properly after payment is approved.	Name on Card		
	Card holder signature required _		Date

Montgomery College is an Equal Opportunity Affirmative Action Title IX institution.