Continuing Education Registration

5 Ways To Enroll In Non-Credit Courses

Enroll ASAP to guarantee your seat in the course! VISA, MasterCard, and Discover accepted.

1. By Mail Registration form and check or credit card payment. (Address is at bottom of form.)

2. By Fax Registration form and credit card information to 860-344-7488.

3. Walk-In ***Please call if you plan to visit the office.*** Office hours are 8 am – 4:30 pm, Monday – Friday, but may change daily depending on activities, meetings, etc. Please call ahead.

4. By Phone 860-343-5865. Registration with credit card only. See above office hours.

5. Company Billing To submit your company/organization billing requests, ***please send:*** an official, signed letter from an authorized manager with employee name(s), course name(s), and CRN #(s); and a separate completed registration form for each employee. Payment must be received before start of the course. Company billings cannot be accepted by phone.

Registration deadlines for most courses: Wednesday of the week before a course starts. Please enroll as soon as possible to make sure your seat is guaranteed and to lessen the chance of a course being cancelled.

For all but in-person registrations, you will receive confirmation of payment by mail. Please mark the class dates on your calendar.

2012 Continuing Education Registration Form

Please print the information requested in the boxes below.

Social Security Number ___ - ___ - ____ *Last Name* _____ *First Name* _____ *M.I.* ___

Street Address _____ *City or Town* _____ *State* ___ *ZIP Code* _____

Birth Date ____ *Example 11/05/52 = Nov. 5, 1952*

Area Code ___ *Telephone/Evening* ___ - ____

Area Code ___ *Telephone/Day* ___ - ____ *Ext.* ____

E-mail* _____ Male ❑ Female ❑

Citizenship/Residence
1. ❑ U.S. Citizen
2. ❑ Resident Alien
3. ❑ Foreign Resident

1. ❑ Black, non-Hispanic
2. ❑ American Indian
3. ❑ Asian or Pacific Islander
4. ❑ Hispanic
5. ❑ White, non-Hispanic
6. ❑ Non-Resident Alien

Have you ever attended a Community College in CT for *EITHER* a credit *OR* Continuing Education course?
Yes❑ No❑

Are you seeking a certificate in a Continuing Education program?
❑ *Yes* ❑ *No*

If so, please list the certificate program _____

**Email. If you would like information on upcoming courses or programs, please provide your email.*

Course information should be provided in the appropriate spaces below (see example on line 1):

CRN#	Course Title	Date	Location	Cost
# 1510	Kundalini Yoga - Level 1 - 6 classes, 1.15hr - Tues	1/24 - 2/28	Middletown	$89
# 1511	Kundalini Yoga - Level 1 - 6 classes, 1.15hr - Mon	4/16 - 5/21	Middletown	$89
# 1512	Kundalini Yoga - Level 2 - 8 classes, 1.30hr - Wed	2/1 - 3/21	Middletown	$135

Attached is my check: ❑ *Payable to:* ***MxCC***

Total Cost $

Mail to: Continuing Education Office
Middlesex Community College
100 Training Hill Road
Middletown, CT 06457

Account Number _____ *Expiration Date* _____

Signature _____