



CONTINUING EDUCATION LANGUAGE PROGRAM REGISTRATION FORM

Last name:

First name:

Street address:

Apt. #:

City:

State & zip code:

Cell phone:

Home phone:

E-mail address:

Amount paid: \$305
 \$315
 \$330
 \$30

Do you want to
receive the
parking permit in
the mail?

Yes
No

Course title:

French - Intermediate
French - Advanced conversation
Italian - Intermediate
Portuguese - Intermediate
Spanish - Intermediate
Spanish - Advanced
Book Club

Signature:

Date: