



COURSE REGISTRATION FORM

Registration for non-credit courses is continuous throughout the year and is accepted on a first come, first served basis. Please complete this form and register using one of the four convenient methods.

Date _____ Student ID # _____ Birth date _____

Name (last, first, middle initial) _____

Address _____ City _____ State ____ Zip _____

Phone (day) _____ (evening) _____

Email address _____ Male Female

Would you like to receive information regarding courses via email? Yes No

FOUR EASY WAYS TO REGISTER			
<u>TELEPHONE</u>	<u>FAX</u>	<u>IN PERSON</u>	<u>MAIL</u>
857-1400	857-1450	Terry Campus Corporate Training Center – Room 405 Dover, DE 19904	Delaware Tech Terry Campus 100 Campus Drive Dover, DE 19904

COURSE NUMBER	COURSE TITLE	BEGINNING DATE	COST
TOTAL			

THREE EASY WAYS TO PAY

Source of payment Self Employer Other _____

Check payable to DTCC Check # _____ Bank _____

Cash (In person only)

Credit Card VISA Discover MasterCard

Card # _____ Verification code _____ Exp date _____

Name as it appears on credit card _____

Billing address if different from above:

Address _____ City _____ State ____ Zip _____

Authorized Signature _____

NOTE: The information requested below is optional and will be used for statistical purposes only.

Ethnic origin:

<input type="checkbox"/> African-American	<input type="checkbox"/> Caucasian
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Asian/Pacific Islander
<input type="checkbox"/> Native American/Alaskan	<input type="checkbox"/> Other

For internal use only

Rec'd by Mail In person Fax Phone

Employee processing form _____