

Lifelong Learning Registration Form

INSTRUCTIONS: Use this form to register in person or by mail. If registering by mail, return this form to the address below. To make payment, complete the information and authorization on the bottom of this form. This form must be received and processed prior to the first class meeting. Incomplete forms, forms received after the first class meeting and forms from students who have outstanding accounts will not be processed.

Please print the following information

NAME <i>Last</i>		First		MI
ADDRESS <i>Street Number/Name</i>				
CITY	STATE	ZIP CODE	DATE OF BIRTH	
HOME PHONE NUMBER		EMAIL ADDRESS		

Enter your course selections

	COURSE NAME	START DATE	AMOUNT
1.			
2.			
3.			
4.			
5.			
6.			

The information on this form has been provided by me and is true and complete to the best of my knowledge. I agree to provide proof of any information if it is requested. I understand that false or misleading information may lead to loss of course credit, loss of tuition and fees paid, dismissal from KCC and/or criminal action.

Student's Signature _____ Date _____

Credit Card Information

If you wish to charge your course fees, please complete the following information:

\$ _____ Specify Card Type _____
Total amount you wish to charge

Card number _____ 3-Digit Security Code _____

Expiration Date _____ Cardholder's Name _____

Cardholder's Signature _____

Lifelong Learning
Kellogg Community College
450 North Avenue
Battle Creek, MI 49017-3397

For More Information
Contact Lifelong Learning at 269-965-4134
or email ll-info@kellogg.edu
kellogg.edu/lifelong