



# 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**

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

**Enter your course selections**

	CLASS 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](http://kellogg.edu/lifelong)