

## FALL 2017 Excursions in Learning Registration Form

Register one student per form. Please print clearly. Refunds according to MCC policy.  
For more information, call 860-512-2804 or email cschultz@manchestercc.edu

Student's Name \_\_\_\_\_ first \_\_\_\_\_ last \_\_\_\_\_ New Student?  yes  no

Male  Female  Birth Date: \_\_\_\_\_ Grade: \_\_\_\_\_ Banner ID# (if known): \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Best phone number to reach a parent/guardian on the day of class: \_\_\_\_\_ Who's # is this? \_\_\_\_\_

**Email for registration confirmation:** \_\_\_\_\_

Permission to photograph your child and use photographs in our catalog? (See page 2.)  yes  no Parent/Guardian signature: \_\_\_\_\_

Any food allergies or special needs? \_\_\_\_\_

CRN#	Course Title	Course Date(s)	Time	Room	Fee

Where did you hear about us? (Check all that apply.)

Mall Cart at Buckland Hills     Internet Search     Other:  
 Newspaper Ad     Our Child's School  
 Friend     Town Library

**Total Fees: \$** \_\_\_\_\_  
(After Discount)

**DISCOUNT:**  
Save \$5 per class (see page 3)  
**Choose one option only.**

Early Registration (postmarked by 10/10/17)  
 Multi-Sibling  
 Recruit a Friend

Name of Sibling / Friend: \_\_\_\_\_

*Friend/Sibling registration forms must be submitted together to receive discount.*

**Four Ways to Register:**

1. By mail: Excursions Registration, MCC, Great Path, MS #16, P.O. Box 1046, Manchester, CT 06045-1046
2. By fax or phone: using a MasterCard, VISA or Discover: 860-512-2801 (fax) 860-512-2804 (phone)
3. By email: Scan completed forms and attach. Pay by credit card. Email to: CSchultz@manchestercc.edu
4. In person: at the Continuing Education office, LRC B147 (Please email or call for office hours.)

Check or money order (# \_\_\_\_\_) enclosed.

**Make check or money order payable to "MCC."**

I authorize the use of my  MasterCard  VISA  Discover  American Express  
 cardholder name (print) \_\_\_\_\_ cardholder signature \_\_\_\_\_  
 credit card # \_\_\_\_\_ expiration date (month/year) \_\_\_\_\_  
 cardholder phone number \_\_\_\_\_

**Office Use Only**

**Regis.**

**Conf.**

**Receipt #**

