

Delgado **NON-CREDIT REGISTRATION FORM** Year 20 _____

Community College

Please print or type. Use Black Ink Pen. Fall Spring Summer

| Personal Information | Payment Information |
|--|--|
| Name: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Last First MI </div> Social Security Number: _____ Address: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> City State Zip Parish </div> Home Phone _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Area Code </div> Cell Phone _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Area Code </div> E-mail _____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth _____ Ethnic Code <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="text-align: left;"> <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic </div> <div style="text-align: left;"> <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> Asian/Pacific Islander/ Indian Subcontinent <input type="checkbox"/> Other </div> </div> How did you hear about us? <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="text-align: left;"> <input type="checkbox"/> TV <input type="checkbox"/> Radio <input type="checkbox"/> Web </div> <div style="text-align: left;"> Newspaper: <input type="checkbox"/> Times-Picayune <input type="checkbox"/> Gambit Weekly </div> </div> | <input type="checkbox"/> Cash – do not mail /e-mail if using cash <input type="checkbox"/> *Check <input type="checkbox"/> Discover Expiration Date _____ <input type="checkbox"/> Master Card Expiration Date _____ <input type="checkbox"/> Visa Expiration Date _____ Account No. _____ Name on Card _____ Signature _____ <p>* Make check payable to Delgado Community College.</p> <ul style="list-style-type: none"> All refunds requests must be in written form. Requests can be wither faxed or submitted in person. Approximately six (6) weeks is required to process any type of non-credit refund. 100 percent refund only if class is cancelled by the college. 90 percent refund if class is dropped at least two (2) days prior to the first class Sorry, no refund after the class begins |

| Course # | Section # | Course Title | Location | Start Date | Fee |
|--------------------|-----------|---------------------------|-----------|------------|-------|
| Example XXAP704 | 101 | Professional Tour Guiding | CITY PARK | MAR. 10 | \$160 |
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* Registration cannot be processed without payment.