



Banner ID@ _____
 Office Use: _____
 Date Entered: _____
 Cashier Date: _____

Collier Campus

Continuing Education Non-Credit Registration Form

www.edison.edu/collier/ce

Today's Date: _____

Last Name: _____

First Name: _____

Mailing Address: _____

City: _____

State: _____ **Zip code:** _____

Professional License #: _____

Birth date: _____ **Gender:** Male Female

Contact Phone #: _____

Email Address: _____

Race: Caucasian (non-Hispanic) Black (non-Hispanic) Hispanic

American Indian/Alaskan Asian or Pacific Islander Other

Information on ethnic origin and gender is VOLUNTARY.

Residency Statement: I qualify as a Florida resident Yes No

Where did you learn of this course?

Edison Website Newspaper; Which paper? _____ Word of Mouth Postal Mail Email

| Course Title | Date | Course | Campus | Fee* |
|--------------|------|-------------|---------------|------|
| | | | | |
| | | Office Only | | |
| | | | | |
| | | | Total= | |

Are you currently an Edison Student? Y N

Current Edison State students only: Does this course conflict with any class in your current schedule? Yes No

If you marked yes, we may need written permission from your instructor to enroll you for this course.

***Course Fees are subject to change without notice**

Payment Options *DO NOT SEND CASH IN THE MAIL*

Check enclosed / Check # _____ (make check payable to Edison State College)

Visa MasterCard AMEX Discover Credit Card #: _____

Expiration date: _____

Name As It Appears On Card: _____

| | |
|---|---|
| <p>Please mail your completed form with payment to:</p> <p style="text-align: center;">Continuing Education Edison State College – Collier Campus 7007 Lely Cultural Parkway Naples, FL 33413</p> | <p>You may also fax your completed form with credit card info to:</p> <p style="text-align: center;">239-732-3109</p> <p>Or email it to: cecollier@edison.edu</p> <p>For questions or more information, please call: (239) 732-3128</p> |
|---|---|

I have been given and have read the flier for this class and understand the Refund Policy

Signature: _____

Requests for refund **one week** prior to the first class meeting will be granted. If you have a Higher One card through Edison the refund will be transferred to your Higher One Account.
 Due to the short-term nature of most Continuing Education programs, refunds will not be granted on or after the first class meeting. By submission of this form you are stating that you accept our refund policy.