



Division of Corporate and Community Education

CORPORATE EDUCATION REGISTRATION FORM

Please print all information clearly.

Last Name First Name Full Middle Name *Date of Birth

Home Street Address City State Zip Home/Cell Phone

Email *Social Security #

Are you a U.S. Citizen? Yes No

*SS # and/or DOB Required

Have you ever taken a course or training at Massasoit before? Yes No

I authorize MCC to automatically register me into the corresponding Spring course at no additional cost.

Signature:

Race/Ethnicity (Optional)

Do you consider yourself to be Hispanic/Latino? Yes No

In addition, select one or more racial categories to describe yourself:

- American Indian/Alaskan Native Asian Black/African-American Cape Verdean Haitian Native Hawaiian/Pacific Islander White

- Male Female Veteran

Training Course: 15523 PDOE 729 C1, Pipefitting 3, Pt. 1

Date and Time: Mondays & Wednesdays, September 18 – December 20, 2017, 6:00 PM – 9:00 PM Cost: \$1593.00

Company Name: Work phone:

Company Address: Street Address City State Zip

Refund Policy: Withdrawals from a course must be received in writing at least 24 hours prior to the course for a 100% refund. No refunds after the 1st class meeting.

Please check type of payment:

Company will pay invoice for training. Employer Authorization Signature

Check submitted.

Please charge the following credit card:



CHARGE CARD AUTHORIZATION ACCOUNT NUMBER

MONTH YEAR EXPIRATION DATE

Mail completed form to:

MASSASOIT COMMUNITY COLLEGE Steven Litcoff, Associate Director One Massasoit Blvd. Brockton, MA 02302-3996 T: 508.588.9100x1322

Fax/email form with credit card authorization to:

Fax #: 508-427-6532 Email: slitcoff@massasoit.mass.edu

Name as it appears on card

Cardholder's Signature