HARFORD COMMUNIT COLLEGE	PLEASE MAKE SURE TO RETU FOR ANY FULL OR PARTIAL OF COMPLETE OR PARTIAL OF COMPLETE OR PARTIAL OF COMPLETE OR PARTIAL OF COMPLETE OR PAYMENT	DAY CAMPS:	5	Office Use Only  Spring Summer Fall  Registered by:  Cashier's Office:  C/R Ini Date			
COLLEGE			L	<u> </u>			
CC ID	Last Name (Please Print)		First N	ame		MI	
reet		City	State			Zip Code	
ome Phone	Cell/Work Phone <i>(cir</i>	rcle one)	IMPORTANT! Please print legibly. Email: Personal or Business				
<b>NO,</b> I choose not to be con	the event of an emergency on campus of atacted in the event of a campus emergence.		-		red contact phone number		
ate of Birth:/	Day Year Senior	Citizen (60 years or olde	er): 🗖 YES	□ NO	Gender:  Male	Female	
itizenship: 🗖 U.S. Citizen	☐ Permanent Resident/Asylee/	Refugee (Must bring in o	riginal card.)				
Non-U.S. Ci	tizen (Must submit copy of immigration o	document.) Visa Type:					
ow did you hear about tl	he following categories:	Indian or Native Alaskan	(04)	Native Hawaiian or Othe	Kids Summer Program	Booklet Other	
COURSE #	COURSE TITLE	COURSE FEE	MATERIAL FEE	OUT-OF-COUNTY SURCHARGE \$20	OUT-OF-STATE SURCHARGE \$35	COST	
	□ Discover □ American Express provide credit card information.  ge Training Division	violation of the Student ( the Informati	hese regulation Tode may be on on on this for	e by the policies and rons may subject me to obtained from the Student is accurate and compuse for dismissal from	penalties and sanct dent Activities Office plete. Failure to prov	ions. (A copy o .) I certify that	