



**HARFORD**  
COMMUNITY COLLEGE

# Continuing Education Registration Form

**MAIL TO** Harford Community College  
Continuing Education and Training Division  
401 Thomas Run Road, Bel Air, MD 21015  
P: 443.412.2376 | F: 443.412.2383

## Office Use Only

Spring  Summer  Fall

Registered by: \_\_\_\_\_

Cashier's Office: \_\_\_\_\_

C/R \_\_\_\_\_ Ini. \_\_\_\_\_ Date \_\_\_\_\_

Waiver:  Yes E D S

H  
HCC ID \_\_\_\_\_ Last Name (Please print.) \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Work Phone (Circle one.) \_\_\_\_\_ Email  Home or  Business

### Contact Information for HCC AlertMe Emergency Notification System

**YES**, please contact me in the event of an emergency on campus or a non-emergency campus closing. \_\_\_\_\_  
Preferred contact phone number

**NO**, I choose not to be contacted in the event of a campus emergency or non-routine campus closing. \_\_\_\_\_

**Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Senior Citizen** (60 years or older)  YES  NO **Gender**  Male  Female  
month / day / year

**Citizenship**  U.S. Citizen  Permanent Resident/Asylee/Refugee (Must bring in original card.)  
 Non-U.S. Citizen (Must submit copy of immigration document.) Visa Type: \_\_\_\_\_

**Ethnicity** Are you of Hispanic or Latino origin?  YES  NO  
(Defined as a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

**Race** Select one or more of  White (01)  Black/African American (02)  Asian (03)  
the following categories:  American Indian or Native Alaskan (04)  Native Hawaiian or Other Pacific Islander (05)  
(See harford.edu/dfr for definitions of race.)

### How did you hear about this course?

Newspaper  Radio  HCC Marquee  HCC Website  Printed Schedule of Classes  HCC Kids Summer Program Booklet  
 Email  Postcard/Flyer/Brochure  HCC Facebook  Referral from Family or Friend  Referral from Instructor  
 Other \_\_\_\_\_

COURSE #	COURSE TITLE	TUITION	FEE	OUT-OF-COUNTY SURCHARGE \$20	OUT-OF-STATE SURCHARGE \$35	COST
<b>SUBTOTAL</b>						
<b>WAIVER ELIGIBILITY:</b>						<b>WAIVER TOTAL</b>
<b>TOTAL COST</b>						

### Payment is due at time of registration.

Check  Money Order  
 VISA  MasterCard  Discover  American Express

We will contact you for payment by credit/debit card as soon as your registration has been processed.

I accept and agree to abide by the policies and regulations of HCC. I understand that violation of these regulations may subject me to penalties and sanctions. (A copy of the Student Code may be obtained from the Student Activities Office.)  
I certify that the information on this form is accurate and complete. Failure to provide accurate information may be just cause for dismissal from the College.

\_\_\_\_\_  
Signature Date

**NOTE:** Photographs may be taken in classrooms and/or on campus and used for Harford Community College promotions including, but not limited to, use on Facebook, the College website, and print materials. **If you do not wish to be photographed, please inform the photographer.**