

Registration Form



Archbishop Anthony Meagher Catholic Continuing Education Centre
 Tel: 905.683.7713 Fax: 905.683.9436



Registration Form For General Interest & Computer Courses

 Last Name First Name Date of Birth (YY/MM/DD) M/F

 Street Address Apt. No.

 City or Town Postal Code

 Home Phone Business Phone

 Email Address

Course Name	Code	Location	Start Date	Day	Fee

Please make certified cheques/money orders payable to Durham Catholic District School Board. Total

Certified Cheque
 Cash
 Money Order
 Visa
 MasterCard
 Interac

CARD # _____ EXPIRY DATE: _____

CARDHOLDER NAME: _____ SIGNATURE: _____

Participants should attend the first class unless contacted by the school office to say the course is full or cancelled. There may be additional charges for textbooks and material. Some courses may have a minimum age requirement.

Refund Policy:

- If a class is closed or fails to start because minimum enrollment is not met, all fees paid will be refunded.
- A full refund will be issued if requested five business days prior to the start of the class.
- A non-refundable administrative fee of \$25.00 is charged. **If the course has started, no refunds will be given.**

I agree to release and save harmless Durham Catholic District School Board and its employees and other agents from any and all claims or other proceedings, regardless of who makes them, in respect of any damage or injury arising by reason of participation in the program by myself or the person who is shown as the "registrant" on this form. I agree to give my permission for my photograph/video and/or name to be used for school related activities.

SIGNATURE: _____ DATE: _____