Noncredit registration form

Purchase College
STATE UNIVERSITY OF NEW YORK

Check one: Spring ____ Fall ____ Summer ____
Year: _____

Please mail or fax this form to the address or number below.

STUDENT INFORMATION: (please print)

Check one: ____male ____female

last name | first | middle

date of birth (mm/dd/yyyy)

campus ID ("P") number, if known

street address

tel. (day): area code+number

tel. (eve): area code+number

city | state | zip code

email address

NONCREDIT COURSE SELECTION

course id (3 letter prefix + 4 digits)	CRN (5 digits)	course title	start date	instructor	tuition[1] [2]

[1] Early registration discount tuition must be paid in full by the early registration deadline

[2] Parking and (optional) Student Identification (More Card) fees are paid after registration

FORM OF PAYMENT

- ○ Check
- ○ Money order
- ○ Visa
- ○ MasterCard
- ○ American Express
- ○ Discover

For credit card payments please enclose a signed credit card authorization form

TOTAL	
Lab fee (if applicable)	
Nonrefundable registration fee*	**25**
TOTAL ENCLOSED	

***registration fee is due only once per semester**

Student Agreement: You are required to read and acknowledge the following statement:

Your registrations for course(s) means that you assume responsibility for paying all tuition and fees associated with your registration. Unless you withdraw from a course by the published deadline, you are responsible for the charges even if you did not attend or log in to a single class. The liability and refund policy is available on the Student Financial Services site, www.purchase.edu/financialservices. Your acknowledgement below indicates that you understand that college policies, including the Community Standards of Conduct as referenced in the Purchase College Student Handbook and the Institutional Response to Alcohol and Other Drugs are available online at www.purchase.edu/policies.

Student's signature **Date**

Parent/Legal Guardian Signature, if applicable **Date**

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