

PLEASE PRINT • Completion of all fields is required in order to process your enrollment.
 All personal information is kept confidential and is for internal use only.

Mrs. Ms. Miss Mr. Dr.

Last Name _____ First _____ Middle Initial _____

1st Name for Nametag (nickname): _____ Birth Date (Month/Day only) _____ / _____

How would you like your name to appear on your certificate? _____

Email _____
 (Please provide us with the email address at which you prefer to be contacted.)

Home Address (not school) _____

City _____ State _____ Zip _____ County _____

Home Phone (_____) _____ Cell Phone (_____) _____

Have you ever taken a class with Neuhaus Education Center? Yes * No
 * If yes and you could be listed under another last name or school, what would that be? _____

PROFESSIONAL INFORMATION:

Current Position _____ Grade Level _____

School District _____

School: _____

EDUCATION:

Undergraduate degree (e.g. B.A., B.S.?) _____ Year _____ Major _____

College _____ Teacher Certificate(s) _____

Graduate Degree (e.g. M.A., M.Ed.?) _____ Year _____ Major _____

College _____ Other Certification _____

Why interested in attending? _____

Please indicate which class you will attend:	Class Dates	Class Cost	or Class Deposit	Total
<input type="checkbox"/> Basic Language Skills (10 days) ‡	_____	\$1,530	\$50	_____
<input type="checkbox"/> Basic Language Skills – Advanced (10 days) ‡	_____	\$1,115	\$50	_____
<input type="checkbox"/> Language Enrichment	_____	\$780	\$50	_____

‡ required prerequisite(s)

- Please send registration form and payment at least **two weeks prior** to class date.
- For Basic Language Skills participants, submission of a copy of your college transcript or diploma is required two weeks prior to class date.
- Class deposits are not refundable. Balance of class fees is due two weeks prior to class date.
- You may reschedule once with fourteen (14) days notice prior to class date. Without the fourteen-day notice, Neuhaus cannot reschedule and there will be no refund.

Payment:	<input type="checkbox"/> Check	<input type="checkbox"/> Purchase Order	<input type="checkbox"/> Visa Card	<input type="checkbox"/> Master Card
Date _____	Account No. _____	Exp. Date _____		
Name on Card _____	Signature _____			
Amount of Payment (please circle):	\$50 deposit	\$ full class cost	Other: \$ _____	