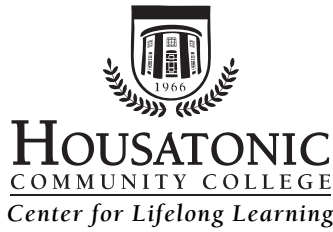


# HCC Center for Lifelong Learning REGISTRATION FORM



**Housatonic Community College**  
 Lifelong Learning Center  
 900 Lafayette Boulevard, BH - 274  
 Bridgeport, CT 06604  
 Phone: (203) 332-5057  
 Fax: (203) 332-8558

## REFUND POLICY

Students who withdraw, in writing, from any course 72 hours or more before the class meets will receive a full refund. **No refunds will be allowed once the class has begun.**

It only takes 4 easy steps to register. After completing these steps, you may drop off the form at the Center for Lifelong Learning, or mail, or fax it (see above for mailing address and fax number). **If you have any further questions or need additional information, call (203) 332-5057.**

**STEP 1**

Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Street Address or PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone \_\_\_\_\_ Cellphone \_\_\_\_\_

Email Address \_\_\_\_\_ Today's Date \_\_\_\_\_

**STEP 2 Check appropriate boxes 1 through 6.**

**1. Citizenship Status:**

U.S. Citizen

Not a U.S. Citizen

Permanent Resident

**2. Gender:**

Male

Female

**3. Please indicate the race(s) you consider yourself to be:**

10. White

20. African American

45. Asian

50. American Indian/Alaska Native

80. Native Hawaiian/other Pacific Islander

60. Choose not to respond

90. Other Race: \_\_\_\_\_

(please print)

**4. Ethnicity:**

Hispanic/Latino

Non-Hispanic/Latino

Choose not to respond (none)

**5. Have you previously taken any courses at a CT community college?**

Yes (if applicable, please enter your Banner ID at the end of this application)

No

**6. How did you hear about us?**

Newspaper/Magazine Ad

Radio Ad

Facebook

Google

Other: \_\_\_\_\_

(please print)

**STEP 3**

CRN#	List Course Title You Are Registering For:	Start Date:	Fees:
<b>TOTAL DUE:</b>			

**STEP 4 Please choose your payment method:**

I will be paying with a credit card

**Accepted if payment is made by mail, fax, phone, or in-person.**  
 Please select which card you are using.

VISA                      Card Expiration Date

MASTERCARD               -

DISCOVER

Card Number

Signature \_\_\_\_\_

I will be paying with check/money order

**Accepted if payment is made by mail or in-person.**  
 Please make checks and money orders payable to:  
 Housatonic Community College  
 Check/Money Order # \_\_\_\_\_

Amount enclosed : \_\_\_\_\_

I will be paying with cash

**Accepted if payment is made in-person only.**  
**Note:** Students must register in the Center for Lifelong Learning (Beacon Hall Room 274) before bringing cash payments to the Business Office in Lafayette Hall.

**OFFICE USE ONLY**

Stamps and Validation

**Banner ID Number:**  (First-time registrants please leave blank)