

Community Education

Call 352-395-5193 if you have trouble with this form.

COMMUNITY EDUCATION

401 NW 6th St., Ste. DA-100 \cdot Gainesville, FL 32601 ph: 352-395-5193 \cdot sfcollege.edu/communityed

COMMUNITY EDUCATION REGISTRATION FORM

Student ID#:						
First Name:		Last Name:	Last Name:		Middle Initial:	
Address:						
City:		State:		Zip:		
Home Phone:		Work F	Phone/Cell Phone:			
Email Address:			Date of	Birth:/	1	
Please make sure you pr organization or company	=	ss to receive an email r	eceipt. This information	will not be shared	d with any other	
Sex:	Race:					
Male	1 White	3 American In	dian/Alaskan Native	5 Hispanic		
Female 2 African American 4 Asian/Pacific			c Islander	lander 6 Other		
Course No./Section No.	Course Title		Course Fee	Lab Fee ——	Total 	
					_	
American Express, Visa	Mastercard, or Discover	card no:		Total:		
			Exp. Date:		_	
Cardholder's name and t	he cardholder's billing a	address if different fron	n above:			
Check number if register	ing by mail:	Santa F 401 NV	complete the registration Fe College Community E V 6th Street, DA-100 Ville, FL 32601		vith check to:	

If you do not receive a confirmation, call the Community Education office at 352-395-5193 within 24 hours.