

**REGISTRATION IS EASY!**



**ONLINE:** Real-time, online registration is available anytime. Go to [www.polaris.edu](http://www.polaris.edu) and register now!

**PHONE:** Register by phone with a Visa or MasterCard. Call (440) 891-7600 during office hours. Office hours are listed on page 40.

**FAX:** Fax to (440) 891-7642 with a Visa or MasterCard.

**MAIL:** Mail your completed registration form and payment to: Polaris Career Center Adult Education, 7285 Old Oak Blvd., Middleburg Hts., OH 44130

**IN PERSON:** Bring your completed Registration Form and payment to the Adult Education Office during office hours. Office hours are listed on page 40.

**DIRECT BILL:** Companies/organizations registering employees for classes will be invoiced upon receipt of written documentation. Call Nada Koury at (440) 891-7600 for details.

If paying by check, please make check payable to: **Polaris Career Center**

**TUITION MUST BE PAID AT TIME OF REGISTRATION.**

**Please note: This is a one-year catalog. Save for future reference.**

**REGISTRATION FORM** (Please Print Clearly)

Name \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_  
 (first name) (last name)

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_ Ext. \_\_\_\_\_

Email Address: \_\_\_\_\_ Birthday: \_\_\_\_\_

May we contact you via e-mail with updates and offers? Yes \_\_\_ No \_\_\_

Education: HS Diploma \_\_\_ GED \_\_\_ Career/Tech. School \_\_\_ Some College \_\_\_ College Graduate \_\_\_ Master's Degree \_\_\_

Where did you hear about this class?

Catalog \_\_\_ Polaris Web site \_\_\_ Polaris Email \_\_\_ Employer \_\_\_ Referral/Friend \_\_\_ Previous Student \_\_\_  
 Community/Chamber Magazine \_\_\_ Yellow Pages \_\_\_ Mimi's \_\_\_ Sun Newspaper \_\_\_ Plain Dealer \_\_\_ Westlife Newspaper \_\_\_

Course Title	Starting Date	Fee (tuition + materials)	Less Resident or Senior Discount	Fee with discount applied
1. _____	_____	\$ _____	\$ _____	\$ _____
2. _____	_____	\$ _____	\$ _____	\$ _____
3. _____	_____	\$ _____	\$ _____	\$ _____
4. _____	_____	\$ _____	\$ _____	\$ _____
	Total	\$ _____	\$ _____	\$ _____

Check or Money Order \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Name on Card \_\_\_\_\_

Signature \_\_\_\_\_



Call today (440) 891-7600  
[www.polaris.edu](http://www.polaris.edu)