

REGISTRATIONISEASY!

IN PERSON: Anyone may register in person for any class, but **Job & Career Training** program registration is in person only. Please bring your completed registration form and payment to the Adult Education Office during office hours.

All other classes may register by:

PHONE: Register by phone with a credit card. Call 440.891.7600 during office hours.

ONLINE: Real-time, online registration is available anytime. Go to polaris.edu/register and enroll!

FAX: Send fax to 440.891.7642 with your credit card information.

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

DIRECT BILL: Companies/organizations registering employees for classes will be invoiced upon receipt of written documentation.
 Call Nada Koury at 440.891.7646 for details. If paying by check, please make check payable to: **Polaris Career Center.**



ADULT EDUCATION OFFICE HOURS
JANUARY 3, 2018 – JUNE 29, 2018
 Monday – Thursday 8:00 AM – 8:30 PM
 Friday 8:00 AM – 3:00 PM
Note: Evening office hours are not available when evening classes are not in session. This occurs during holiday periods and between semesters.

Follow us on:



TUITION MUST BE PAID AT TIME OF REGISTRATION .

REGISTRATION FORM (PLEASE PRINT CLEARLY AND NOTE * REQUIRED FIELDS)

*Name _____ *Gender: Male _____ Female _____
(first name) (last name)

*Address _____ *City _____ *Zip Code _____

*Cell Phone () _____ Home () _____ Email _____

Where did you hear about this class?

Catalog ___ Polaris Website ___ Polaris Email ___ Referral/Employer ___ Referral/Friend ___ Previous Student ___

Print Ad ___ Internet Ad ___ Facebook Post ___ TV Ad ___ Radio ___ Other ___

Additional comment/detail _____

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_ Credit Card_ CreditCard Type _____

Card Number _____

Expiration Date _____ Security Code _____

Name on Card _____

Signature _____

