



Durham Continuing Education



# Computer & General Interest Registration Form

Please print this form and fill it in when you register in person, by mail or by FAX

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month/Day/Year

Suite/Apt/Unit # \_\_\_\_\_ Street # & Name: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Male  Female

Course Code	Course Name	Course Location	Start Date	Time	Fee
Total					

Please make cheques payable to the Durham District School Board. Postdated cheques are not accepted.

Payment by: Cash  Cheque  Money Order  Visa  Amex  MasterCard

Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

Please make cheques payable to the Durham District School Board.

**You will receive a receipt for your registration by mail. Material fees are payable to the instructor on the first night. Please see our refund/cancellation policy located under Registration Information.**

"I agree to release and save harmless the Durham District School Board and its employees and other agents from any and all claims or other proceedings, regardless of who makes them, in respect of any damage or injury arising by reason of participation in the program by myself or the person who is shown as the "registrant" on this form".

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MAIL TO: E.A. Lovell Continuing Education Centre  
120 Centre St. S., Oshawa, Ontario L1H 4A3  
FAX (VISA, MasterCard & American Express ONLY) 905-436-1780