

# Hitchcock Academy Community Center Adult Registration Form

Note: Registrations received or postmarked less than 7 days before the first class will be subject to a \$5.00 late fee.

**Please print and complete this form and return with a check made out to Hitchcock Academy.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Course1: \_\_\_\_\_

Dates: \_\_\_\_\_

Course2: \_\_\_\_\_

Dates: \_\_\_\_\_

Course3: \_\_\_\_\_

Dates: \_\_\_\_\_

Friends donation	\$ _____
Amount for registration	\$ _____
Total enclosed	\$ _____

Thank You