



COMMUNITY EDUCATION REGISTRATION FORM

This form may only be used to register for courses whose section numbers begin with X or Z.

Last Name First Name MI

Other Name Registered Under

Street Address Apt #

City State Zip County

Home Telephone Alternative Phone E-Mail Address

DATE OF BIRTH [Month][Day][Year] Student Identification # Major Code 0002N

We are always open on the Web!

Register ONLINE - <http://communityed.csi.edu> click on the Register and Pay Online link.
Or, mail form with payment to: CSI Community Education Center, PO Box 1238, Twin Falls, ID 83303

Cancellation Policy

If a class is canceled, a 100% refund of registration fees will be given. Please allow 3 to 4 weeks for processing. Refunds will be issued in the student's name in the form of a check from the College of Southern Idaho.

Refund Policy

Students who wish to withdraw from a class must do so by the end of the last business day before the class starts. No refunds will be granted after that date.

Term	Course Title	Code	Dates	Location	Fees	For Staff Only

PAYMENT METHOD: CASH CHECK # _____ CREDIT CARD: MasterCard Visa Discover AE

Credit Card Number _____ Expiration Date _____ V Code _____

Print Name as it appears on card: _____ Signature _____

Student Signature _____ Date _____ (Parent or Guardian for Minors) _____ Date _____

Payment is expected at the time of registration. Course instructors are not permitted to accept payment for registration fees. Students may register for the course and pay online, in person or over the phone. If payment is not made within 30 days, a \$50 late fee will be assessed to the student account. Please see the current Community Education brochure for other department policies. By signing this form, you agree to all terms set forth by CSI and Community Education Center.