

# REGISTRATION FORM – Spring 2023

Complete one form per person - **Make Additional Copies as Needed**

**MAKE CHECKS PAYABLE TO: CWC-CONTINUING ED.**

265 Westville Avenue, Rm. 105 West Caldwell, NJ 07006

***Please Print***

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Parent's Name \_\_\_\_\_ *(If participant is a minor at 13-17 years' old)*

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone # \_\_\_\_\_ (required)

\*Email address \_\_\_\_\_ (required)

**\*You cannot register without an email address!**

Course Name:	\$
Course Name:	\$
Course Name:	\$
Course Name:	\$
Course Name:	\$

**TOTAL** \$

- **NO Cash accepted for payment (on-line with credit card or mail in check).**
- Only **checks** accepted for In-Person payment with registration form.
- **No confirmations will be sent after you register for a course.**

Office only:

Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Check # \_\_\_\_\_