



St. Clair County Community College

Registration is easy.

Sign up today.

<p> Online: www.sc4.edu/wave See instructions on page 34.</p> <p> Fax to: (810) 989-5738</p> <p> Mail to: SC4 Workforce Training Institute P.O. Box 5015, Port Huron, MI 48061-5015</p> <p> Walk in: SC4 Enrollment Services Room 123, Acheson Technology Center (ATC)</p> <p> Information: (810) 989-5788</p>	<p>PAYMENT OPTIONS: (Choose one)</p> <p><input type="checkbox"/> A) Check/money order enclosed (Made out to SC4)</p> <p><input type="checkbox"/> B) Company billing (see below)</p> <p><input type="checkbox"/> C) Charge to: (circle one) </p> <p>Account number: _____</p> <p>Expiration date: _____</p> <p>Three-digit code from back of card: _____</p> <p>Name on card: _____</p>
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Please print

MR. _____ DATE _____

MS. _____
LAST FIRST MIDDLE

HOME ADDRESS _____
(PARENT'S NAME IF YOUNGER THAN 18 YEARS OF AGE)

_____ DAYTIME TELEPHONE _____
CITY STATE ZIP

SOCIAL SECURITY NUMBER _____ / _____ / _____ DATE OF BIRTH _____ / _____ / _____
OR SOCIAL INSURANCE NUMBER (Canada) (IMPORTANT) MONTH DAY YEAR

E-MAIL: _____

ETHNICITY: _____01 Native American _____03 African American _____05 White
OPTIONAL (check one) _____02 Asian _____04 Hispanic _____06 Other

CLASS NUMBER/SECTION	CLASS TITLE	TOTAL
ZPIT-160-01	SAMPLE POWERPOINT - LEVEL I	\$135

COMPANY BILLING INFORMATION: Company name _____ Authorized by _____
 Billing address _____ Company phone _____
 City, State, ZIP _____

TOTAL AMOUNT PAID _____