

# Community Education Registration Form

District Program Center, 8400 E. Point Douglas Road S., Cottage Grove, MN 55016-3324

Phone: 651-425-6600, FAX 651-425-6620, [www.cecool.com](http://www.cecool.com)

•For Office Use Only•

Date \_\_\_\_\_ Amt Pd \_\_\_\_\_

Mail \_\_\_\_\_ Walk-in \_\_\_\_\_ Fax \_\_\_\_\_

Chk# \_\_\_\_\_ CashRcpt# \_\_\_\_\_

Please complete a separate form for each participant with a different last name or address. Forms can be printed at [www.cecool.com](http://www.cecool.com)

Check here if you have:  a new address  a new phone number  a new email

Participant's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

First Name Last Name

Address \_\_\_\_\_ Apt/Unit# \_\_\_\_\_ Primary Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Secondary Phone (\_\_\_\_\_) \_\_\_\_\_

Adult's e-mail \_\_\_\_\_ Gender:  Male  Female

**For Youth Registrations**

Mother/Guardian \_\_\_\_\_ Work or Cell (\_\_\_\_\_) \_\_\_\_\_

Father/Guardian \_\_\_\_\_ Work or Cell (\_\_\_\_\_) \_\_\_\_\_

Grade in 17/18 \_\_\_\_\_ Special Needs\* \_\_\_\_\_ Shirt Size \_\_\_\_\_ Instrument \_\_\_\_\_  
(if included) (if required):

\* Individuals with special needs are welcome to register for our classes and camps. Please note on your registration any needs your child may have or call 651-425-6600 if your child needs assistance to participate successfully and allow at least a two week notice for us to make assistance arrangements.

Course Number	Course Title	Class Date	Class Fee	Discount	Final Fee

**Make checks payable to: District 833 Community Education**

**Total:** \_\_\_\_\_

- **Swimming** - list first four choices in order of preference. Confirmations sent.
- **Seniors 60 years or older** may take a 20% discount on most Adult Enrichment classes. (Use promo code "senior20" for online registration.)

## To Help Us Serve You Better:

What is the racial/ethnic group of the registrant?

### **Racial Category**

American Indian/Alaskan Native  White  
 Asian & Pacific Islander  Two or more  
 Black or African American  Other or unknown

### **Ethnic Category**

Hispanic or Latino  Not Hispanic or Latino

Collecting this information helps us to provide programs and services that meet the needs of our entire community.

Charge my:



# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Signature \_\_\_\_\_



## Community Education

District Program Center  
8400 E. Point Douglas Road South  
Cottage Grove, MN 55016 - 3324

## Choose the most convenient method for you:

Visit [www.cecool.com](http://www.cecool.com) | Fax this registration form to 651.425.6620 | Mail or hand deliver your registration  
Office Hours: 7:30 - 5 PM or use the drop box to the left of the main doors

### **REGISTRESE CON CONFIANZA! Tenemos ésta forma en Español!**

Buscando Diversión, Excelencia y para hacer algo Significativo. Donde el aprendizaje revive!  
Si usted tiene alguna pregunta ó preocupación, por favor llámenos al (651) 425-6600