

# Registration Form



## Student Number

(If you have previously attended Assiniboine)

## Location

☐

Brandon

☐

Dauphin

☐

Other

Course Name and Fees

Course Number

## Personal Information (\* Required)

Last Name\*

First Name\*

Middle Name

## Method of Payment

Please choose one method of payment:

☐

Visa

☐

Mastercard

Must pay within 5 business days of application submission:

☐

Cheque/Money Order

(payable to Assiniboine College)

☐

Cash

☐

Debit

Credit Card #

Expiry Date

Cardholder Name

Cardholder Signature

Cardholder Phone Number

## Sponsorship (if applicable)

Note: This form must be signed by an authorized company/agency representative. Receipts will be issued in the company/agency name. Refunds will be issued to the company/agency, in the event of cancellation of the course. For information about textbooks, please call the Assiniboine bookstore at 204.725.8721.

Student Name

Please invoice the following company/agency:

Company/Agency

Mailing Address:\*

PO or Box Number and Street

City or Town

Province

Postal Code

Country

Telephone: Home\*

Mobile

Fax

Email\*

Name of Agency Contact

Title

Authorized Signature

## Declaration of Waiver

The college does its best to update program information regularly so applicants are not inconvenienced. However, on occasion, changes do occur. The college reserves the right to modify or cancel a program, option, course, program objective, articulation agreement, fee, timetable, or campus location without notice or prejudice. Please visit our website [assiniboine.net](http://assiniboine.net) for complete and up-to-date program information.

Signature

Date

or

☐

By checking this box, I am electronically agreeing.

Name

Date