



DISTANCE LEARNING • PROFESSIONAL EDUCATION
Course Registration Form

Payment Is Due With This Registration Form

Have you ever taken any credit or non-credit courses or applied for admission to Georgia Tech? YES NO

PARTICIPANT INFORMATION

Today's Date
Legal Last Name Legal First Name MI
Preferred First Name (for nametag) DOB: Month Day Year Last 4-digits SSN:
Company Job Title
Contact Address
City State Zip Daytime Phone
Fax Number Email:
(confirmation will be emailed to this address)

COURSE INFORMATION

Title Subject Course #
Date(s) Location (if known)
Course Fee Early Registration Standard Rate =\$
Additional Optional Fees, if any (item) X quantity =\$
(item) X quantity =\$
(item) X quantity =\$
TOTAL =\$

GUEST INFORMATION • If applicable to this course, provide your guest's name

PAYMENT INFORMATION • Payment Due with Registration Form

Purchase Order Number A copy of an approved PO must be submitted with this form
Credit Card Type Cardholder Name
Card Number Exp. Date / /
Street Address City State Zip
Check Number (include student name, course # and course date check) Make payable to: Georgia Tech

SURVEY • I found out about this course from a

- brochure web email fax magazine ad co-worker friend catalog newspaper ad

If available, please provide the "Z" code from your printed material:

Office Use Only: Date Received