



UMPQUA COMMUNITY COLLEGE  
 1140 College Road - PO Box 967  
 Roseburg, OR 97470  
 (541) 440-4601

**COMMUNITY EDUCATION REGISTRATION**

**BIRTH DATE:** (Required) \_\_\_\_\_

DATE: \_\_\_\_\_ TERM: FA WI SP SU

SEX: MALE  FEMALE  UNITED STATES CITIZEN YES  NO

ETHNIC (Optional): WHITE  ASIAN  BLACK  HISPANIC  AMERICAN INDIAN

NAME: \_\_\_\_\_  
 Last First MI

MAILING ADDRESS: \_\_\_\_\_

City State Zip

HOME PHONE: \_\_\_\_\_ OTHER PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

OTHER: \_\_\_\_\_

**ENROLLMENT STATUS:**

- ENROLLING FOR THE FIRST TIME
- CONTINUING (ENROLLED LAST TERM)
- RETURNING (ENROLLED PREVIOUSLY BUT NOT LAST TERM)

CRN #	COURSE TITLE	INSTRUCTOR	DAYS	TIME	ROOM	TUITION	FEE

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TOTAL DUE \_\_\_\_\_ PAID BY: **CHECK (NO.)** \_\_\_\_\_ **CASH** \_\_\_\_\_

**MASTERCARD OR VISA** NUMBER \_\_\_\_\_ 3-DIGIT CODE (BACK OF CARD) \_\_\_\_\_ EXP DATE \_\_\_\_\_  
 (Circle One)

Rev 11/11

\_\_\_\_\_  
 Student/Cardholder Signature Signifying Approval & Authorization Date

*In case of refund, check is issued to the student regardless of the payment method, i.e. credit card, unless a formal third party sponsored account agreement is set up with UCC.*