

Non-Credit Registration Form

California State University
Long Beach
College of Continuing and
Professional Education



Student ID number _____ Today's Date _____

Last Name _____ First Name _____ M.I. _____ (Other Name) _____

Address _____ Apt. No. _____

City _____ State _____ ZIP _____

Please check here if this is a change of address

() _____ () _____

Day Phone _____ Evening Phone _____

() _____

FAX Phone _____ e-mail Address _____

Birth Date _____ Female Male

Priority Code

(Optional)
Who are you employed by? _____

How did you hear about this program?

- | | | |
|---|---|---|
| <p>Catalog or Brochure</p> <ul style="list-style-type: none"> <input type="checkbox"/> catalog was mailed to me (MC) <input type="checkbox"/> picked up catalog on campus (BC) <input type="checkbox"/> picked up elsewhere in community (B) <input type="checkbox"/> brochure was mailed to me (MB) | <p>Saw Ad in:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LA Times (AL) <input type="checkbox"/> Gazette News(AG) <input type="checkbox"/> Long Beach Press Telegram (AP) <input type="checkbox"/> Orange County Register (AO) <input type="checkbox"/> Long Beach Business Journal (AB) <input type="checkbox"/> Orange County Business Journal (AC) <input type="checkbox"/> other ad (A) | <p>Heard Ad on Radio</p> <ul style="list-style-type: none"> <input type="checkbox"/> KCRW (RKC) <input type="checkbox"/> KPCC (RKP) <input type="checkbox"/> KTWV (RC) <input type="checkbox"/> Other Radio Station (R) <p>Other:</p> <ul style="list-style-type: none"> <input type="checkbox"/> referred by a friend <input type="checkbox"/> saw information on Web <input type="checkbox"/> got an e-mail notice <input type="checkbox"/> Other |
|---|---|---|

I wish to enroll in these classes

Schedule Number	Title	Fee

TOTAL FEES \$ _____

Method of Payment:

- Check Enclosed—Made payable to CSULB
- MasterCard Visa

Account Number _____ Expiration Date _____

PRINT name as it appears on card _____ 3 Digit Security Code _____

Authorized Signature _____

(562) 985-5561 (800) 963-2250
FAX (562) 985-5823

Mail address:
6300 State University Drive, Suite 100 Long Beach, CA 90815

Open :
Monday-Friday 8am-5pm

Three Convenient ways to Register!

- In Person:** Bring completed registration form and payment the address at left during business hours.
- By Mail:** Send completed registration form and payment to our mailing address(at left).
- By Phone:** Call during business hours at **(562) 985-5561** or **(800) 963-2250** to register with your VISA or MasterCard. Only accepted before class begins.

A Separate registration form is needed for each person who wishes to enroll. If you need extra forms, we'll be glad to send you more.

Schedule Changes: Due to circumstances often beyond our control, College of Continuing and Professional Education reserves the right to cancel, postpone, or combine classes or change instructors. Every effort will be made to accommodate students who are inconvenienced by such changes.