



**BOSTON  
ARCHITECTURAL  
COLLEGE**

# INTENT TO REGISTER

**PLEASE FILL OUT THIS FORM AND RETURN IT TO THE ADMISSIONS OFFICE.**

## GENERAL INFO

Name:

Address 1:

Social Security Number:

Address 2:

Phone Number:

City:

Email:

State:  Zip:

**PLEASE CHECK THE APPROPRIATE BOXES AND SIGN.**

**Yes, I would like to attend the BAC for Fall 2017!** I am enclosing my \$150 Intent to Register Fee:

The program I am entering is (full degree name):

*By submitting this signed form along with payment of the Intent to Register Fee you are authorizing the BAC to register you for your first semester of courses and you will be responsible for the tuition and fees due and held to the published refund schedule found on the BAC website.*

I would like to RSVP for **New Student Orientation** on:

July 20–21, 2017 (Thursday–Friday)

No, I have decided to decline my acceptance to the BAC for the following reason:

I cannot attend this semester, but please defer my acceptance until next semester.

Please withdraw my acceptance, as I will be attending another college.

Name of college or university:

Please withdraw my acceptance, as I am pursuing another direction, and am no longer considering this program.

Signature:

Date:

## PAYMENT OPTIONS

Intent to Register Fee Payment Options:

Pay by credit card.  
Call the Admissions Office at: **617.585.0123**

Pay by check. Check made payable to BAC and mail to:  
**Boston Architectural College, Office of Admissions  
320 Newbury Street  
Boston, MA 02115**