

# COURSE REGISTRATION FORM

## STUDENT INFORMATION

Full Name: \_\_\_\_\_ BAC ID# (if known) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender:  Male  Female

Ethnicity:  American Indian or Alaska Native  Asian  Black or African American  Hispanic or Latino  
 Native Hawaiian or Pacific Islander  Two or More Races  White  Decline to Answer

Select if this visa status applies to you:  F-1  F-2  B-1  B-2

Certificate Program (if applicable): \_\_\_\_\_

## REGISTRATION INFORMATION

Year/Term	Course ID	Section	Course Title	Credits	Day/Time

## DISCOUNT INFORMATION

Select an eligible below. Discounts are not valid on non-credit courses.

- 10% Senior (age 60+)  
 50% BAC Graduate of BAC degree or certificate program

## PAYMENT INFORMATION

**Full payment is required to complete your registration.**

Pay Online at [www.the-bac.edu/onlinepay](http://www.the-bac.edu/onlinepay). Email your payment confirmation number to [ce@the-bac.edu](mailto:ce@the-bac.edu).

By signing below, I understand that I will be charged based on the published tuition and fees and am responsible for all financial obligations to the BAC. I acknowledge that I am subject to the BAC's refund policy. I understand that the BAC reserves the right to cancel a class due to insufficient enrollment, at which time I will be contacted about a refund or option to enroll in an alternate course. I have read and agree to this information.

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

### Office Use Only:

Rec. Date:	Reg Signature:	Bursar Signature:	Disc:	Amt Charged:
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