|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  | **Student ID** |   |   | Wa State Resident  **Yes / No** |
|  **REGISTRATION FORM** | **Or SSN** |   |   | U.S. Citizen **Yes / No** |
| First |   |   | Middle | Last |   |   |   |   |   |
| Name |   |   |   | Name |   |   |   |   |   |
| Phone Day: | Mailing |  |   | City |   | State |   |
| Eve: |   | Address |   |   |   |   |   |   |
| **Item** | **Course Title** | **Location** |  | **Day** | **Time** | **Fee** | **Date** | Zip |   |
| 9553 | Riedel Wine Tasting | Grandview U199 | Saturday | 2:00-4:00pm | $60  | 11/10/2012 |   |   |
| For Information, please call 509-882-7015 Monday-Friday 8:00am-5:00pm |  | **Total** |  |  |
| Mail completed form along with your check or money order to:  |  |  |   |   |   |
| Registrar's Office, Yakima Valley Community College, 500 W. Main Street, Grandview, WA 98930  |  |  |  |
| Or FAX to (509) 882-7012 with the following information: □ Mastercard □ VISA  |  |  |  |  |
| Cardholders Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_\_\_Acct. # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |