

**Make Checks** 

**Payable To:** 

**Comments:** 

Name:

## Region 9 Adult & Community Education

Phone:

377 River Road
Mexico, ME 04257
(207) 364 - 2012 OPTION 4
adulted@region9school.org

All fields in RED MUST be filled out in order for your registration to be processed successfully.

| Region 9 Adult<br>& Community<br>Education | Address: | Date of Birth: |                  |        |  |
|--|----------|----------------|------------------|--------|--|
|  | Town:    | Email:         | Email:           |        |  |
|  | Zip:     |                |                  |        |  |
| Class                                      |          | Class Date     | Class Time       | Amount |  |
|  |          |                |                  |        |  |
|  |          |                |                  |        |  |
|  |          |                |                  |        |  |
|  |          |                |                  |        |  |
|  |          |                |                  |        |  |
|  |          |                |                  |        |  |
|  |          |                | Grand Total      |        |  |
| Credit Card Payment                        |          |                |                  |        |  |
| Credit Card Number:                        |          | Expiration Da  | Expiration Date: |        |  |
|  |          |                |                  |        |  |
| CVV Code:                                  |          | Zip Code:      | Zip Code:        |        |  |
|  |          |                |                  |        |  |