

# Adult Continuing Education Registration Form

Class Name: \_\_\_\_\_ Tuition \$ \_\_\_\_\_

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Gender: M F

Main Reason For Enrollment:

- ☐ Obtain Employment
- ☐ Upgrade Employment
- ☐ Obtain Credentials
- ☐ Pursue Higher Education
- ☐ Personal Goal

Age Range

- ☐ Under 25
- ☐ 25-50
- ☐ 51-64
- ☐ 65+

Method of Payment:

Check # \_\_\_\_\_ Voucher # \_\_\_\_\_ VSAC# \_\_\_\_\_

Cash (Amount): \_\_\_\_\_ Credit Card# \_\_\_\_\_

Type: \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_ CCV#: \_\_\_\_\_

Refund Policy: No Refunds will be made one week prior to the start of class. Refunds will be made if the Adult Education Class is canceled.

Student Signature: \_\_\_\_\_

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

It is the policy of Lyndon Institute not to discriminate on the basis of a student's or family member's actual or perceived race, color, ancestry, national origin, creed, religion, gender, gender identity, sexual orientation, marital/civil union status, age, military/uniformed service or veteran status, disability, or other legally-protected classification in the provision and administration of its education programs, activities, services, and access provided to the public, in accordance with and to the limits of applicable requirements of state and federal laws. Lyndon Institute complies with the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973, as well as other applicable state and federal laws with respect to accommodating individuals with disabilities. Lyndon Institute provides special education to eligible students in accordance with the School's special education approval from the State of Vermont, state and federal legal requirements, the School's policies and in coordination with the student's school district.

Office use: ☐ Pathway ☐ Step ☐ Personal Goal ☐ Mailing List

Referred By:

- ☐ Advertisement ~ Flyer
- ☐ Brochure ~ Mailing
- ☐ Voc. Rehab.
- ☐ Dept. of Labor ~ Vt. Agency
- ☐ Web-site ~ Employer
- ☐ Other

Education:

- ☐ Current Student
- ☐ No High School Diploma/GED
- ☐ High School Diploma/GED
- ☐ Some College/no degree
- ☐ Associated Degree
- ☐ Bachelors Degree
- ☐ Graduate Degree
- ☐ Masters Degree

Tuition Paid By:

- ☐ Student
- ☐ Employer of Student
- ☐ VSAC
- ☐ Reach-up
- ☐ Vocational Rehab.
- ☐ Insurance Company
- ☐ VT.Agency
- ☐ Dept. of Labor
- ☐ Vt. National Guard
- ☐ Other

PO Box 127, Lyndon Center, VT 05850  
Phone: 802.535.3695 Fax: 802.535.3702  
info@lyndoninstitute.org