



# Enrichment Class Registration Form

6305 State Road 70 East, Bradenton, FL 34203 • 941.751.7900  
ManateeTech.edu

NAME: \_\_\_\_\_  
Last First

ADDRESS: \_\_\_\_\_  
Street Apt or P.O. Box Home Phone  
\_\_\_\_\_  
City State Zip Code Cell Phone

E-MAIL ADDRESS: \_\_\_\_\_

COURSE: \_\_\_\_\_ LOCATION: \_\_\_\_\_

TIME: \_\_\_\_\_ START DATE: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

NO REFUNDS FOR CANCELLATIONS OR AFTER CLASS START DATE  
PLEASE MAKE PAYMENT TO: MTC.  
CHECK CASH MC VISA DISCOVER

OFFICE USE ONLY	
Class Fee: \$	_____
Lab Fee: \$	_____
Total: \$	_____
Cash	Check#: _____