

registration form

winter 2010

Rhode Island School of Design
Department of Continuing Education
Two College Street, Providence, RI 02903

telephone 401 454-6209
outside local area 800 364-7473, ext. 2
www.risd.edu/ce

OFFICIAL USE ONLY _____

PLEASE PRINT FULL NAME (REGISTER ONLY ONE STUDENT PER FORM. COPY THIS FORM OR REQUEST ADDITIONAL FORMS IF NECESSARY.)

STUDENT'S LAST NAME FIRST MIDDLE

DATE OF BIRTH [] MALE [] FEMALE

HOME ADDRESS

SOCIAL SECURITY NUMBER

CITY STATE ZIP CODE

OCCUPATION

HOME PHONE WORK PHONE

NAME OF PARENT/GUARDIAN IF STUDENT IS A MINOR

E-MAIL ADDRESS [] I PREFER NOT TO RECEIVE PROMOTIONAL E-MAILS

NAME OF EMERGENCY CONTACT FOR MINORS

PLEASE TELL US HOW YOU LEARNED ABOUT RISD CONTINUING EDUCATION

TELEPHONE OF EMERGENCY CONTACT FOR MINORS

FOR STATISTICAL PURPOSES ONLY, PLEASE CHECK ONE (OPTIONAL)

[] AFRICAN AMERICAN [] ASIAN [] CAUCASIAN [] HISPANIC/LATINO [] NATIVE AMERICAN [] MULTI-ETHNIC (PLEASE SPECIFY): _____

COURSES

	TUITION	SPECIAL FEES	SUBTOTAL
COURSE NUMBER SECTION NUMBER COURSE TITLE (FIRST FIVE WORDS)	\$	+ \$	= \$
COURSE NUMBER SECTION NUMBER COURSE TITLE (FIRST FIVE WORDS)	\$	+ \$	= \$
COURSE NUMBER SECTION NUMBER COURSE TITLE (FIRST FIVE WORDS)	\$	+ \$	= \$

DISCOUNTS

[] Senior Citizen [] RISD Matriculated Student
[] RISD Alumna/us: Year Graduated _____ Major _____
[] RISD Museum Member: Membership # _____ Exp. Date _____

Tuition Discount (see page 35 for details) \$ _____
Phone registration fee \$15 for courses meeting 18 hours or more \$ _____
\$5 for courses meeting less than 18 hours \$ _____
Certificate fee \$25 for declared certificate candidates only \$ _____
TOTAL DUE \$ _____

CERTIFICATE STUDENT STATUS *if applicable*

PLEASE CHECK ALL THAT APPLY	CHECK THE APPROPRIATE PROGRAM
[] I am enrolling as a certificate candidate for the first time this semester, and my certificate application is attached.	[] Advertising Design [] Drawing + Painting Studies [] Animation
[] I am currently enrolled as a certificate candidate.	[] Appraisal Studies in Art + Antiques [] Historic Preservation (temporarily not accepting new enrollments) [] Art School Preparation
	[] Children's Book Illustration [] Interior Design [] Comic Art
	[] Comic + Sequential Art [] Natural Science Illustration [] Fashion Design
	[] Computer Animation [] Print Design Process + Production [] Game Design
	[] Digital Photography [] Web Design + Development [] Movie-Making
	[] Digital Video Production [] Photography

Floral Artistry Institute
if applicable
[] I am currently enrolled in the Floral Artistry Institute.

PAYMENT

PAYMENT IN FULL IS REQUIRED TO REGISTER. PLEASE INDICATE FORM OF PAYMENT.

[] Check made payable to RISD | CE CHARGE TO [] VISA [] MASTERCARD
[] Written evidence that tuition is paid by employer, scholarship or agency
ACCOUNT NUMBER 3-DIGIT SECURITY CODE (ON BACK OF CARD)
NAME ON CARD EXPIRATION DATE

Fax or mail to:
401 454-6218
RISD | CE
Two College Street
Providence, RI 02903

POLICY AGREEMENT

By registering, I agree to abide by RISD | CE's academic, financial, disciplinary, and other policies referenced in the RISD | CE catalog and website.

STUDENT SIGNATURE (IF STUDENT IS A MINOR, PARENT OR GUARDIAN MUST SIGN)

DATE