Registration Form

Name (first and last)		
Address		
CityStateZip Code		
Email Address:	•	
Phone Number:()Date of Birth		
Class Title	Start Date	Fee
Become a Loan Signing Agent	8/20/24	\$129-
	Total \$	
Your payment must acc		rm.

Check: please enclose check made payable to Las Positas College, Community Education

OR

Please charge my U visa Umastercard UAmex
Cardholder's Name:
Card No.:
Exp. Date:
CSV:
Amount:
Signature:Date:

You will receive an email confirming your enrollment. Las Positas College, Community Education reserves the right to change class location, schedules, fees, and instructors when necessary. Moreover, we reserve the right to cancel classes. Minimum enrollment is required for classes to start. If Community Education cancels a class, you will receive a full refund. Please note any age restrictions associated with the class/es you are enrolling in.

Students: By submitting this form, you are indicating that you have read and agree to our policies:

- https://www.laspositascollege.edu/communityed/partici pantagreement.php
- https://www.laspositascollege.edu/communityed/suppor t.php

easy ways to register



Online

visit our main website: www.laspositascollege.edu/co mmunityed/ Select "Current Catalog and Online Registration."



Give us a

Call us at 925-424-1467 during our business hours. We cannot guarantee day of registration.



Bring the attached registration form to: 3000 Campus Hill Drive, Livermore CA 94551, Office 1690A. Please call ahead of time to ensure our coordinator will be available to assist you.



Mail in the attached form along with your check made payable to Las Positas College, **Community Education** 3000 Campus Hill Drive, Livermore CA 94551.

Please mail your form with payment at least two weeks before the start of class.