

Course Registration Form

Please complete the form below. **All registration forms must be accompanied by tuition.** You can also register online by viewing the Course Catalog at http://extension.lmu.edu.

LAST NAME			FIRST NAME			M.I.
ADDRESS						
CITY			STATE	ZIP		
DAY PHONE EVENING PHONE		E-MAIL ADDRESS				
DATE OF BIRTH (Required for Registration)			SOCIAL SECURITY NUMBER (Optional)			
☐ MALE ☐ FE	LE					
REGISTRATION						
	refully. Requests for refunds cs.lmu.edu/extension/resourc		ited in accordance wi	th the policies of LMU Exter	nsion. You can re	ad our policies online
	TERM: ☐ SUMMER ☐ FALL ☐ SPRING YEAR					
COURSE NU	MBER CRN		COURSE	TITLE		TUITION + FEES
				Т	OTAL TUITION	\$
HOW DID YOU H	EAR ABOUT US?					
□ INTERNET SEARCH □ LMU E-NEWSLETTER □ SOCIAL MEDIA □ BROCHURE/FLIER □ REFERRAL □ CONFERENCE/EXHIBIT TABLE						
□ E-MAIL □	SAW AN AD (WHERE)	□	SAW IN AN ARTICLE	(WHERE)		
METHOD OF PA	′MENT heck, Cashier's Check or N	lanay Ordar will be seed	antad with a neint w	agistration form Disease	maka ahaak ar m	anay ardar nayahla ta
'Loyola Marymour	t University.' To pay with a Cr d will be accepted.					
CHECK OR MONEY ORDER NUMBER TOTAL PAYMENT EN		ICLOSED \$				