

**Community Education Services  
(Not-for-Credit) Registration Form**

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OFFICE USE ONLY	
Entered by	_____
Date	_____

**HOW TO REGISTER**

<b>ONLINE:</b> www.MarinCommunityEd.com <b>PHONE:</b> 1.415.485.9305 <b>MAIL:</b> Community Education Registration College of Marin, 835 College Avenue, Kentfield, CA 94904 (Please allow at least eight (8) business days prior to the first class meeting.)	<b>IN PERSON:</b> Monday-Thursday, 9 am-noon and 1 pm-4 pm; Friday 9 am -noon* Kentfield Campus: Student Services Center, Room 145 835 College Avenue, Kentfield, CA 94904  Indian Valley Campus: Building 7, Room 194 1800 Ignacio Blvd., Novato, CA 94949  *Open hours are subject to change
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**PLEASE CHECK:**    New Student    Continuing Student    Fall 20\_\_\_\_    Winter 20\_\_\_\_    Spring 20\_\_\_\_    Summer 20\_\_\_\_

**Last Name:** [Grid of 25 boxes]

**First Name:** [Grid of 25 boxes]   **MI:** [Grid of 2 boxes]

**Email:**

[Grid of 40 boxes]

**Mailing Address:**

**Number and Street:** [Grid of 30 boxes]   **Apt:** [Grid of 3 boxes]

**City:** [Grid of 20 boxes]   **State:** [Grid of 2 boxes]   **Zip:** [Grid of 5 boxes]   **Country:** \_\_\_\_\_

<b>Birth Date (required):</b> MONTH DAY YEAR [Grid of 2 boxes] [Grid of 2 boxes] [Grid of 4 boxes] Example:   1   2   2   8   2   0   0   7	<b>Daytime Phone:</b> [Grid of 3 boxes] [Grid of 3 boxes] [Grid of 3 boxes]   Ext. _____	<b>Gender (optional):</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Membership (see reverse):</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Interested
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**Enrollment:**

Class ID #	Days	Class Title	Fee	Authorization**

\*\* To register for a class after it has begun, see the instructor for an authorized signature.

**Confirmation of Enrollment**

You will receive an email confirmation. You may also review your enrollment online at [www.MarinCommunityEd.com](http://www.MarinCommunityEd.com). Once you create your Learner account, you may access your account and view your enrollment at any time.

**Method of Payment**

Community Education only accepts checks for mail-in registration. Please submit a separate check payable to College of Marin for **EACH** requested course. To pay by credit card please contact our offices, or register online at [www.MarinCommunityEd.com](http://www.MarinCommunityEd.com).

**Please turn over to complete and sign page 2**

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**ESCOM Membership (optional)**

\$15.00/Annual Emeritus Students College of Marin (ESCOM) 1 Adult

Last Name:

First Name:  MI

Email (required): \_\_\_\_\_ Birth Date (required):  MONTH  DAY  YEAR

For more information on membership, visit [www.MarinCommunityEd.com](http://www.MarinCommunityEd.com)

**Emeritus Students College of Marin (ESCOM)**

ESCOM membership, available to adults age 55 and over, provides members with valuable benefits, including: special discounted course fees for dozens of Community Education ESCOM courses (EC), ESCOM-only scholarship opportunities for students with financial need, access to over 20 ESCOM clubs, access to ESCOM centers at both the Kentfield and Indian Valley campuses, free subscription to the monthly ESCOM Journal, invitations to ESCOM art exhibits and member socials, 10% discount at the College's cafeteria, College of Marin library privileges, discounted tickets to College of Marin performances, and pride in supporting lifelong learning.

**Refund Policy**

*Classes canceled by College of Marin will be refunded in full. In the event of a cancellation, you will be notified via email. Refunds will be processed automatically. You do not need to submit a refund request.*

Drop/Refunds are not automatic; you must complete and submit a drop/refund request form. Forms can be found at [www.MarinCommunityEd.com](http://www.MarinCommunityEd.com), or by visiting our offices.

Requests are recorded based on the date the form is received by the Community Education Department. A notification email will be sent to you once your request has been successfully submitted and received. You will be notified via email of approval or denial of your request. Refund processing generally takes four (4) to six (6) weeks.

We will gladly process your request for a refund if it is received in our office by 4pm, three (3) business days prior to the starting date of the class. *College of Marin offices are closed on Fridays during the summer.*

For Classes Starting on	Refund requests must be received by:	
	Fall/Winter/Spring Quarters	Summer Quarter
Saturday, Sunday, or Monday	Wednesday	Tuesday
Tuesday	Thursday	Wednesday
Wednesday	Friday	Thursday
Thursday	Monday	Monday
Friday	Tuesday	Tuesday

**We cannot accept requests for drops/refunds, regardless of the reason, if they are received less than three (3) business days prior to the class start date.** Community Education is a self-supporting program and is funded solely on course registration and student paid fees. Because the programs do not receive any State or Federal funding, all class enrollments after the three-day deadline are final. No refunds will be granted after the three-day deadline. *If a cancellation is granted, it will be subject to a \$10 service fee per class for each student-requested class change or cancellation.*

**Student's Signature:**

I declare that the foregoing statements of fact provided by me on this form are true and correct.  
I acknowledge I have read and accept the refund policy.

Signature \_\_\_\_\_ Date \_\_\_\_\_