

**REGISTRATION FORM**

Hebrew College Student ID # \_\_\_\_\_ (If known)

Name (last, first, middle) \_\_\_\_\_ M/F \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (cell) \_\_\_\_\_

Email \_\_\_\_\_

Date of birth \_\_\_\_\_ Social Security number \_\_\_\_\_

▪ Matriculated Students: Which degree/certificate are you pursuing? \_\_\_\_\_

What is your anticipated graduation date \_\_\_\_\_

▪ Nonmatriculated Students :  Credit  Noncredit  Cross-registration (School) \_\_\_\_\_

▪ Summer  Fall  Spring

Course #	Course title/Instructor	C = Credit NC = Noncredit

Submit completed form with payment covering tuition plus a \$100 registration fee (if taking courses for credit) or \$50 (for noncredit courses). Registration must be received, with payment, no later than one week before course start date. Registrations received after that date will incur a \$50 late fee. Mail to: Registrar, Hebrew College, 160 Herrick Road, Newton Centre, MA 02459, or fax to 617-559-8601. We do not accept registration by phone. Forms will not be processed without tuition, registration fee and other applicable fees.

Payment type:  Check enclosed (payable to Hebrew College)  Visa  MasterCard

Name on card \_\_\_\_\_ Exp. date \_\_\_\_\_

Credit card number \_\_\_\_\_ Card security code \_\_\_\_\_

Registration fee \_\_\_\_\_ + Tuition \_\_\_\_\_ = Total \_\_\_\_\_

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

Registration is only confirmed when you receive a copy of your course schedule in the mail. If you do not receive such confirmation, please contact the registrar's office to check on the status of your registration.