

**PRINCETON ADULT SCHOOL
P.O. BOX 701
PRINCETON, NJ 08542**

REGISTRATION FORM SPRING 2018

OFFICE USE ONLY

Date rec'd _____

R _____ P _____

RF _____ CR _____

Last name First name Middle

Address

City State Zip

() () _____

Home Phone Office Phone E-Mail Address

Course No. _____ Course Name _____ Fee _____

Course No. _____ Course Name _____ Fee _____

SUBTOTAL: _____

-10% Senior: _____

PAYMENT: Check Number _____ Cash _____ **Registration Fee (\$10 per person per semester) Fee 10.00**

Make checks payable to: Princeton Adult School

Senior citizens (65 or older) are eligible for a 10% discount.

Will you require special assistance? _____

Were you enrolled in the past three years? _____

TOTAL AMOUNT: _____

Contribution to PAS Fund _____
see preceding page

TOTAL PAYMENT: _____

**THE ADULT SCHOOL DOES NOT SEND RECEIPTS OR CONFIRMATIONS.
STUDENTS WILL BE NOTIFIED ONLY IF A CLASS IS FULL OR
CANCELLED. YOU MUST BE 18 YEARS OF AGE TO
REGISTER/ATTEND PAS CLASSES.**