

ADULT EDUCATION REGISTRATION FORM

Name: _____

Address: _____

Email Address: _____ Phone: _____

COURSE REGISTRATION

I would like to register for the following course:

- | | | | |
|--------------------------|----------------------------------|----------------|---------|
| <input type="checkbox"/> | Exercise Boot Camp | 6:00 – 7:00 pm | \$45.00 |
| <input type="checkbox"/> | SST – Stretch, Strength and Tone | 7:15 – 8:00 pm | \$40.00 |
| <input type="checkbox"/> | Beginning Guitar | 6:00 – 8:00 pm | \$80.00 |
| <input type="checkbox"/> | Sewing 101 | 6:00 – 8:00 pm | \$80.00 |
| <input type="checkbox"/> | Creative Writing | 6:00 – 8:00 pm | \$80.00 |
| <input type="checkbox"/> | Google Apps | 6:00 – 8:00 pm | \$80.00 |
| <input type="checkbox"/> | Yoga for Beginners | 6:00 – 7:00 pm | \$45.00 |

(LATE REGISTRATION For registrations after March 22, 2019, add \$5.00)

TOTAL PAYMENT ENCLOSED: _____

Form of Payment: Cash (in-person only) Check – Check Number _____

Do you require any specific accommodations for this course:

- Yes (please describe below) No

Payments must be included with the registration form. Checks should be made payable to **Town of Westport**. Do NOT mail cash. Cash will be accepted for in person registrations.

Please use a separate registration form for each person being registered. If you have questions, please contact the administration offices at greese@westportschools.org or (508) 636-1140, extension 4001.

Registration forms and payment can be mailed or dropped off to:

Westport Community Schools
Central Office Administration
17 Main Road
Westport, MA 02790
Attn: Adult Education Program
