



Registration Form

Course name: _____ Date: _____

Name: _____

Please print legibly

Home address: _____

City: _____ State: _____ Zip code: _____

Daytime phone: _____

Email address: _____

Your email is used for communication, class confirmations and marketing purposes. Emails are not distributed

Payment options:

Sending Check

Calling 218-846-3733 to pay with credit card

Bill my company

Business Name: _____

Business Contact: _____

Business Address: _____

Business City: _____

Business State: _____ Business Zip code: _____

Questions: contact Jamon

218-846-3733

jamon.friendshuh@minnesota.edu