College of the Mainland.

CONTINUING EDUCATION REGISTRATION

SSN or Student ID	NAME (Last,		<mark>First,</mark>	Middle Initial)
CHECK ONE:	<mark>PHYSICAL ADDRES</mark> S	CITY	STATE	ZIP
1. Doyouconsideryourselfto				
be Hispanic/Latino?	Date of Birth	Sex 🖵 Male 🛛 Home Phone	Business	s/CellPhone
2. Inaddition, please selectone		Germale Female		
or more of the following racial categories to describe yourself:	EMAIL ADDRESS			
American Indian or				
Alaskan Native	This is to certify that I	🕽 AM 🔲 AM NOT a legal resi	dent of the College of the M	lainland District. To be a legal resident
Asian	of College of the Mair	nland District, you must reside in c	ne of the following school	districts: Hitchcock, Santa Fe (including
Black or African American	Algoa, Arcadia, Alta Lo	ma), Texas City, La Marque and Dick	inson.	
Native Hawaiian or Pacific Islander	Signature		Date	
U White				

COURSES TO ADD

Term	Synonym	Course Abbreviation	Course #	Section #	Cost

COURSES TO DROP

Term	Synonym	Course Abbreviation	Course #	Section #	Cost			
Refund policy: NO REFUNDS will be made after a class begins. We will be happy to issue a full refund if cancellation is received before the class start date. This policy is based on the fact that CE classes are self-supporting. Registration fees are used instructors as well as for supplies. ** Please initial:								
Personal	COM Continuing Education, Technical-Vocational Building, RmT-1475, 1200 Amburn Road, Texas City, (credit card, debit, money order or check) NO CASH ACCEPTED							
Call	409-933-8586 or 1-888-258-8859, ext. 8586 (credit card or debit only)							
Online	Use WebAdvisor https://webadvisor.com.edu , (Returning students only)							
MAIL IN REGISTRATIONS ARE NO LONGER ACCEPTED.								