



Course(s) Registration Form

# of Credits:	Title of Course(s):	1.	4.
*If attending a live event, write the date & location for the Course Title		2.	5.
		3.	6.

Course Due Date (your choice-Circle One): **May 15th** **September 15th** **December 31st**

Name:(**print**)

School or District Name:

Mailing Address:

City, State, Zip

Phone: (**mandatory**)

Fax:

Email: (**mandatory**)

Method of Payment:	Check # _____
	Credit Card # _____
	Exp. Date _____ Verification Code: _____
	If using Credit Card, complete billing address associated with card _____ _____
Card holder signature authorizing us to charge card / date	

****Duplicate this form for each participant****

The Cost Of Course(s):

1 graduate credit.....\$299	2 graduate credits.....\$399	3 graduate credits.....\$499
4 graduate credit.....\$798	5 graduate credits.....\$898	6 graduate credits.....\$998

PLEASE NOTE

Cost of the credits from the University is included in the price of the Course.
Course price is the **same** even if credits are not being applied for or obtained.

Confirmation will be sent to you via email after you register.

Make check payable to *Healthy Teaching* and send to:

Healthy Teaching
124 E. State Street
PO Box 506
Reading, Michigan 49274