

PAYMENT FORM

Service-Learning: Civic Engagement IN THE COMMUNITY COLLEGE

November 15, 2007
Central Piedmont Community College
Charlotte, NC

* Indicates a required field.

Send to: Central Piedmont Community College P.O. Box 35009 Charlotte, NC 228235	From: *
Attention: Terry McMicking	Date: *
Fax number: 704/330-6442	Phone number: *

You may pay for multiple registrations with the same check or credit card.
However, please list only one credit card per Payment Form.

* Name(s) of registrants: _____ _____ _____ _____
Total registrants _____ x \$ _____ (\$25 per person) Total fees due: _____
* Contact name and email address: _____
* Form of payment (check one): <input type="checkbox"/> Check <input type="checkbox"/> VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> AMEX
* Credit card #: _____
* Expiration date: _____
* Name as it appears on the credit card: _____
Payment will be confirmed by email. Registration is not complete until payment has been fully collected. Registration is transferable to another person, but please submit any changes as soon as possible. Refunds will not be issued after November 5, 2007