

# Registration Form

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Course	Dates	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \_\_\_\_\_

Please send me an application for admission to Clarion University of Pennsylvania.

Please register me for the Continuing Education courses listed above.

Please contact me regarding the certificate programs.

Credit Card Payment:  Visa  MasterCard  Discover

Card No. \_\_\_\_\_  
3-digit v-code \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_ Signature \_\_\_\_\_

## Contact Us

By Mail: Send check (payable to **Clarion University**), money order, Visa, MasterCard, or Discover card number with the completed form to:  
Continuing Education, Clarion University-Venango Campus  
1801 West First Street, Oil City, PA 16301

By Fax: Fax the registration form to 814-676-1348.

By Phone: Call 814-676-6591, ext. 1273, Monday - Friday, 8:30 a.m. to 4:30 p.m.

**All classes must be prepaid. If you need to withdraw from a class, you must do so 10 days before the start date or we will not be able to provide you with a refund.**

It is the policy of Clarion University of Pennsylvania that there shall be equal opportunity in all of its educational programs, services and benefits, and there shall be no discrimination with regard to a student's or prospective student's race, color, religion, sex, national origin, disability, age, sexual orientation/affection, veteran status or any other factors that are protected under local, state, and federal laws. Direct equal opportunity inquiries to Assistant to the President for Social Equity, 207 Carrier Administration Building, Clarion, PA 16214-1232, 814-393-2109.

