

**Registration Form**  
**WVU Parkersburg Community Education Classes**

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Email: \_\_\_\_\_

SSN: \_\_\_\_\_ Ethnic Status: \_\_\_\_\_ Gender: \_\_\_\_\_

Class Title	Start Date	Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Total _____

**Please tell us how you learned about our Community Education Classes**

Flyer  Friend  WVUP Website  Facebook  Employer  Other: \_\_\_\_\_

**Did you sign up for this class to increase your job skills?** \_\_\_\_\_

**If Yes, who is your employer?** \_\_\_\_\_

**Are you a WVUP alumni?** \_\_\_\_ yes \_\_\_\_ no

**If yes and you would like to find out more about the alumni association please visit [www.wvup.edu/alumni](http://www.wvup.edu/alumni)**

**Mail Registration to:**  
WVU at Parkersburg  
WED Community Education Registration  
300 Campus Drive  
Parkersburg, WV 26104

**Email Registration to:**  
[wed@wvup.edu](mailto:wed@wvup.edu)

**Note: Students will be invoiced once the minimum number of participant registrations are received. Please leave a valid e-mail address so that you may receive your invoice.**