



Continuing Education

REGISTRATION FORM

Social Security Number _____ Birthdate ____ - ____ - ____

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Email Address _____

Course Number	Course Name	Registration Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Telephone
405-422-1271

Mail-In
Redlands Community College
Office of Continuing Education
1300 S Country Club Road
El Reno, OK 73036

Fax
405-422-1271

Refund Policy: Registration fees are refundable prior to the date of the first class session, with written request. No refund will be issued on or after the date of the first class session. Full refunds will be given for courses canceled by Redlands Community College. Please allow six weeks for refund processing.