



Office of Continuing Education

REGISTRATION
300 Senior Hall
Cheney, WA 99004-2442

Phone: 509- 359-7380 1-800- 331-9959 FAX: 509-359-2220
<http://ewu.edu/ce>

Today's Date: _____ Registering for: Fall Winter Spring Summer Year: _____

Last Name _____ First Name _____ Middle Name _____ Previous Name _____

Current Mailing Address _____ Street and Number _____ City _____ State _____ Zip Code _____

Email Address _____ 8-5 Phone Number –Including Area Code _____ Home Phone Number - Including Area Code _____

Student EWU ID Number _____ Social Security Number _____ Date of Birth _____
(Will be assigned by EWU, if not known) (Required)

Directory Information: Please restrict my personal information

Do you have any Special Needs? Please specify: _____

Gender: Male Female Washington Resident: No Yes Have you previously earned credit through EWU?
 From ____/____/____ To ____/____/____ No Yes – Qtr _____ Year _____

Classification Category (Based on completed credits):
 Bachelor Degree * **Unofficial Transcript required** Other:
 Graduate (Admitted to EWU Masters) please specify:
 Completed Doctoral Degree
 Non-Credit / Professional Development

Optional:

What race do you consider yourself? (Check all that apply)
 White/Caucasian (800) Black/African American (870) Chinese (605)
 Eskimo (935) Aleut (941) American Indian (597) Name of Principal or enrolled tribe: _____
 Korean (612) Filipino (608) Vietnamese (619)
 Asian Indian (600) Guamanian (660) Samoan (655)
 Hawaiian (653) Japanese (611) Other Asian or Pacific Islander: _____
Specify one group, for example Thai, Cambodian, etc.

Are you of Spanish/Hispanic origin? (Check all that apply)
 No. Not Spanish/Hispanic (999) Yes. Mexican/Mexican American (722)
 Yes. Chicano/Chicana (705) Yes. Puerto Rican (727) Yes. Cuban (709) Yes. Other Spanish/Hispanic: _____
Specify one group, for example Columbian, Spaniard, etc

Course Information:

Subject Code: _____ Course Title: _____
(Please leave blank)

PHED 497-64	Focused Fitness ELF Conference 2015	CRN # 24034	Summer July 15-16, 2015	1 Credit
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Submit Registration and Tuition to:
Eastern Washington University
Continuing Education and Professional Advancement
300 Senior Hall, Cheney, WA 99004-2442 **or Fax 509.359.2220**

<p style="text-align:center;">Course Fee</p> <p>\$ 44.00 Tuition</p> <p>3.50 Tech Fee</p> <hr style="width:50%; margin-left:0;"/> <p>\$ 47.50 Total</p>	<p><input type="checkbox"/> Check (Payable to EWU) <input type="checkbox"/> Money Order <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard</p> <p style="text-align:right;">Account Number _____ Exp. Date _____</p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td><td style="width:5%;"> </td> </tr> </table>																				

Eligible taxpayers may claim a tax credit on EWU courses. For more detailed information, please refer to IRS Publication 3064. "Notice 97-60 Education Tax Incentive." For purposes of the new Hope and Lifelong Learning tax credits. Federal Law (Section 6109 of the Internal Revenue Code) requires the University to obtain your Social Security Number. Thank you for your cooperation.