

# Chariho Adult Education

455A Switch Road  
Wood River Junction, RI 02894  
Phone: (401) 315-2871 (voicemail only)  
E-Mail: Adult.Education@chariho.k12.ri.us  
Web: [Web Address]

## Course Registration Form

### Personal Information (please print clearly)

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

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact #: (\_\_\_\_) \_\_\_\_\_ Employer: \_\_\_\_\_

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

I am a Chariho Regional School District Employee

Position: \_\_\_\_\_ Building: \_\_\_\_\_

I am a United States Veteran Branch: \_\_\_\_\_

### Office Use Only

#### Course

CNA \_\_\_\_\_ Nail \_\_\_\_\_ TA \_\_\_\_\_ Exercise \_\_\_\_\_ GED \_\_\_\_\_

Electrical \_\_\_\_\_ Level \_\_\_\_\_ HVAC \_\_\_\_\_ Level \_\_\_\_\_

Tuition: \$ \_\_\_\_\_ Money Order #: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Balance: \$ \_\_\_\_\_ Staff Initials: \_\_\_\_\_