

CONTINUING EDUCATION PARTICIPANT FORM

CEU PROGRAM: Understanding Youth Development: Keys for Successful Programming

FILE NUMBER: 1611

DATE OF PROGRAM: 9 Month Program beginning October 2008

LOCATON OF PROGRAM: Multiple locations across the State of Arizona

STUDENT INFORMATION (please print legible)

LAST NAME:	
FIRST NAME:	MIDDLE INITIAL:
SOCIAL SECURITY (Optional)	
DATE OF BIRTH:	SEX
MAILING ADDRESS:	
CITY:	STATEZIP CODE
COUNTRY:	
DAYTIME PHONE:	EVENING PHONE:
FAX:	EMAIL:
Credit Card Payment: \$25.00 participant fee	
VISAMasterCard	
American Express CID #(Four digit number in front or back of American Express card)	
Total Charge: \$Cardholders Name:	

PLEASE return this form and the \$25 participant fee to:

University of Arizona Outreach College

Attn: Registration

Please make check payment payable to: The University of Arizona.

888 N Euclid Ave, Room 322,

P.O. Box 210158

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