



CLASSROOM / ONLINE COURSE REGISTRATION FORM

The Center for Financial Training Southeastern does not discriminate on the basis of race color, gender, age, and national or ethnic origin. This document may contain privileged and/or confidential information. It is intended solely for the use of CFTSE and will not be shared without written permission.

NAME: _____ SOCIAL SECURITY # (REQUIRED): _____

TITLE: _____ DEPT: _____

COMPANY NAME: _____

ADDRESS: (No P.O. Box Please) Check One: Residence Business CELL PHONE #: _____

CITY/STATE/ZIP: _____ DAY PHONE #: _____

E-MAIL ADDRESS (REQUIRED): _____ FAX #: _____

STUDENT SIGNATURE: _____ DATE: _____

I certify the accuracy of all information on this application and hereby grant permission to CFTSE to register and withdraw me upon proper notification from the company named above. I also authorize Indian River State College to release a copy of my final grades and/or academic record (transcript) at the end of the term to the representative of CFTSE and/or the company named above. I have read and agree to all of CFTSE's registration policies and procedures, including the withdrawal policy and the academic integrity statement as outlined in the schedule or other marketing pieces.

Registration must be received 7 days prior to start date of course. A \$20.00 late fee will be applied to registrations received less than 7 days prior to the scheduled start date of the course. To register: Fax or Mail this registration form to (305)237-7587/SFCFT, 245 NE 4th Street, Room 3704-10, Miami, FL 33132. **When faxing please confirm registration has been received.** For more information, please call (305)237-3051.

What you need to access these courses:

A computer with optional printer An Internet Service Provider A 28.8 (or higher) baud modem

COURSE (S)	REF. #	COURSE ID OR CATALOG NUMBER	TIME/DAY

YOUR EDUCATIONAL GOAL: Please indicate below which CFT Diploma and/or Certificate you intend to earn.

(Please see <http://sfct.org/diplomas-certificates-and-college-credit> for your options)

(DIPLOMA/CERTIFICATE)

Online Refunds: There is a 100% refund for any cancellations or transfers made before the start of the class and upon the return of the textbook (unmarked) to CFTSE/ABA. Refunds will be made (less \$100 cancellation fee) if a written request is received within 10 business days from the course start date and the textbook is returned (unmarked) to CFTSE/ABA. You may request a transfer only once with a fee of \$100. There are no refunds for cancellations received more than 10 business days after the start of the class. No withdrawal is accepted once you have registered for any self-paced online course.

Classroom Refunds: Please refer to the individual schedules for drop/refund policies.

REGISTRATION WILL NOT BE PROCESSED WITHOUT APPROPRIATE SIGNATURES

CHOOSE ONE: *Bill bank A check is enclosed M/C VISA

*Person/Signature authorizing billing _____
(By signing this form, I accept full responsibility for all monies due to CFTSE and agree to adhere to CFTSE registration policies as stated in the CFTSE program schedule and/or marketing pieces.)

This authorizes CFTSE to charge my Credit Card #: _____ Exp Date: _____

Name on Card/ Billing Address

Signature of Cardholder

Amount: \$