

**REGISTRATION FORM**

Name (R1): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name (R2): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Are there any changes to the contact information from the previous registration? Y N

Would you be interested in serving on a committee? Y N if so, which one? \_\_\_\_\_

<u>R1</u>	<u>R2</u>				<u>R1</u>	<u>R2</u>			
___	___	\$20	1260	Membership	___	___	\$7	1296	Heritage of Northeast CT
___	___	\$7	1290	Travel	___	___	\$7	1291	History
___	___	\$7	1292	Local Interest	___	___	\$7	1293	Wellness
___	___	\$7	1306	Nature I	___	___	\$7	1294	Nature II
___	___	\$7	1307	Author Series	___	___	\$7	1295	Music
___	___	\$7	1299	Climate Change	___	___	\$7	1297	Bridge
___	___	\$7	1298	Write Your Autobiography	___	___	\$0	1300	Be Safe
___	___	\$0	1301	Woodstock Family Farm	___	___	\$0	1302	Voting Matters
___	___	\$0	1303	Training Guide Dogs	___	___	\$0	1304	Alert & Aware
___	___	\$0	1305	Criminal Justice	___	___	\$38	1319	Field Trip – New Britain

**Payment Information:**

Enclosed is check # \_\_\_\_\_ for \$ \_\_\_\_\_. Make checks payable to QVCC.

Credit Card Payment: MC/VISA: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EXP: \_\_\_\_/\_\_\_\_

Last three digits on back of card: \_\_\_\_\_

**Mail Registration to:**

Krissy Larrow – QVCC  
742 Upper Maple Street  
Danielson, CT 06239

<i>Registrant</i>	<i>Banner ID</i>	<i>Term</i>	<i>Date Reg</i>	<i>Amount Paid</i>	<i>Bus Off</i>
R1	@	120112			
R2	@	120112			