

Please enter only one student per form.

STUDENT'S LAST NAME \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ DATE OF BIRTH (REQUIRED FOR MINORS) \_\_\_\_\_  MALE  FEMALE

HOME ADDRESS \_\_\_\_\_ NAME OF PARENT/GUARDIAN IF STUDENT IS A MINOR \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ NAME OF EMERGENCY CONTACT FOR MINORS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ TELEPHONE OF EMERGENCY CONTACT FOR MINORS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_  I prefer not to receive promotional emails

PLEASE TELL US HOW YOU LEARNED ABOUT RISD CONTINUING EDUCATION \_\_\_\_\_

**RACE/ETHNICITY INFORMATION IS OPTIONAL. INFORMATION YOU PROVIDE WILL NOT BE USED IN A DISCRIMINATORY MANNER.**

ARE YOU HISPANIC OR LATINO?  YES  NO  
 SELECT ONE OR MORE OF THE FOLLOWING RACES:  AMERICAN INDIAN OR ALASKA NATIVE  ASIAN  
 BLACK OR AFRICAN AMERICAN  NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER  WHITE

COURSES			TUITION	SPECIAL FEES	SUBTOTAL
COURSE #   SECTION #	COURSE TITLE (FIRST FIVE WORDS)	START DATE (MM/DD/YY)	\$	+ \$	= \$
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**10% DISCOUNTS**  Senior Citizen  
 Tuition Discount \$ \_\_\_\_\_  
 The discount does not apply to special fees.  
 RISD Alumna/us: Year Graduated \_\_\_\_\_ Major/Certificate \_\_\_\_\_ **TOTAL DUE \$** \_\_\_\_\_  
 RISD Museum Member # \_\_\_\_\_ Exp. Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**REMITTED TUITION**  
 RISD Employee/Dependent: Employee Name \_\_\_\_\_ ID# (last 7 digits) \_\_\_\_\_  
 Employees are responsible for special fees.

### POLICY AGREEMENT

By registering, I consent to and agree to abide by RISD|CE's academic, financial, disciplinary and other policies referenced on the RISD|CE website. I also give RISD|CE permission to communicate enrollment, academic and financial information via email to the email address noted above.

STUDENT SIGNATURE (IF STUDENT IS A MINOR, PARENT OR GUARDIAN MUST SIGN) \_\_\_\_\_ DATE (MM/DD/YY) \_\_\_\_\_

### PAYMENT

PAYMENT IN FULL IS REQUIRED TO REGISTER.  
 PLEASE INDICATE FORM OF PAYMENT. (NO CASH PAYMENTS ACCEPTED.)  
 Check or money order made payable to RISD|CE  
 Written evidence that tuition is paid by employer, scholarship or agency

**Fax**  
 401 454-6218  
**Web**  
 ce.risd.edu

**Mail**  
 RISD|CE  
 Two College Street  
 Providence, RI 02903

**Questions**  
 401 454-6200 (OPTION #0)  
 OR cemail@risd.edu