

CENTRAL CAROLINA TECHNICAL COLLEGE

Workforce Development and SC Environmental Training Center

REGISTRATION FORM

Mail: Central Carolina Technical College
SC Environmental Training Center
506 N. Guignard Drive, Sumter, SC 29150
Phone: 803-778-6656 Fax: 803-778-7879
Email: etc@cctech.edu

NAME: _____

COURSE NAME: _____

COURSE DATE: _____

COURSE COST: _____ ONLINE: YES NO

SHORT SCHOOL LEVEL (CHOOSE ONE) A B C D E
(WATER & WASTEWATER OPERATORS ONLY)

DATE of BIRTH: _____ LAST 4 DIGITS of SOCIAL SECURITY: _____
(REQUIRED) (REQUIRED)

SEX: M F US CITIZEN: YES NO

ETHNICITY: African American American Indian Asian Hispanic White

WORK PHONE: _____ CELL PHONE: _____

HOME PHONE: _____ FAX #: _____

MAILING ADDRESS: _____

CITY: _____ COUNTY: _____

STATE: _____ ZIP: _____

COMPANY NAME: _____

EMAIL ADDRESS: _____

PAYMENT INFORMATION:

CHECK (Payable to: Central Carolina Technical College)

CREDIT CARD (CHOOSE One) VISA MC AE

I, _____ hereby authorize CCTC to charge the credit card listed below according to the terms outlined above. This payment authorization is for the training/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with the credit card company; so long as the transaction corresponds to the terms indicated in this form.

REFUNDS: A full refund will be issued for all courses, seminars and workshops canceled by Central Carolina Technical College. Registrations canceled before the cutoff date, ten (10) working days before the scheduled training, will be assessed a 20% administrative fee. There will be no refund for a cancellation less than ten (10) working days prior to the start date. Refunds may be requested by mail, email, in person or by telephone. These requests are the responsibility of the registrant.

Confirmation or receipt available upon request. Call 803-778-6656 or email etc@cctech.edu

CREDIT CARD # _____

NAME on CARD: _____

CARD EXP: _____ SECURITY CODE # _____

CARD BILLING ADDRESS: _____