

# REGISTRATION FORM

Florida A&M University  
Division of Continuing Education  
Program Registration Form for Summer Band Camp



**New Registration Policy:** Make registration payment payable to **Florida A&M University** and mail it and this form to:

Florida A&M University  
Division of Continuing Education  
P.O. Box 864485  
Orlando, FL 32886-4485

**Registration Fees** (Please check applicable fees below.)

Registration \$ \_\_\_\_\_   
Late Fee \$ \_\_\_\_\_   
Other \_\_\_\_\_ \$ \_\_\_\_\_   
Other \_\_\_\_\_ \$ \_\_\_\_\_   
Other \_\_\_\_\_ \$ \_\_\_\_\_

**Total Amount Enclosed** \$ \_\_\_\_\_

**Reminder:** NO cash payments will be accepted.

**Payment Method**

\_\_\_ Cashier's Check \_\_\_ Money Order \_\_\_ MasterCard \_\_\_ Visa \_\_\_ Purchase Order

***Complete the following if you are paying by credit card:***

Account # \_\_\_\_\_ Exp. Date. \_\_\_\_\_

Signature \_\_\_\_\_

**Please Print Legibly or Type**

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Mailing Address City State Zip

\_\_\_\_\_  
Daytime Phone Special Assistance Needed

\_\_\_\_\_  
Email Address