



## Course Enrollment Form

### Professional Development / Continuing Education / Extended Education

Thank you for your interest in enrolling in a Corporate University Course! Please complete the following information. Should you require assistance, please call us at (559) 227-6115.

Date: \_\_\_\_\_ HRC Member? ☐ No ☐ Yes

### Contact Information

☐ Dr. ☐ Mr. ☐ Ms. ☐ Mrs.

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

Business: \_\_\_\_\_ (If applicable)

Address: \_\_\_\_\_ (include suite, apt. or office #)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Main Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

### Courses / Program

Course / Program #1: \_\_\_\_\_ Cost: \$ \_\_\_\_\_

Location (city): \_\_\_\_\_ Date: \_\_\_\_\_ No. of Attendees: \_\_\_\_\_ CEU: ☐ Yes ☐ No CEU Type: \_\_\_\_\_

Course / Program #2: \_\_\_\_\_ Cost: \$ \_\_\_\_\_

Location (city): \_\_\_\_\_ Date: \_\_\_\_\_ No. of Attendees: \_\_\_\_\_ CEU: ☐ Yes ☐ No CEU Type: \_\_\_\_\_

Course / Program #3: \_\_\_\_\_ Cost: \$ \_\_\_\_\_

Location (city): \_\_\_\_\_ Date: \_\_\_\_\_ No. of Attendees: \_\_\_\_\_ CEU: ☐ Yes ☐ No CEU Type: \_\_\_\_\_

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

### Form of Payment

☐ Cash ☐ Personal Check ☐ Company Check | **Credit Card:** ☐ Visa ☐ MC ☐ Discover ☐ Amex

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Signature: (X) \_\_\_\_\_

**Authorization** – I authorize the Corporate University to charge my credit card in the amount indicated above (see "Total Amount").

**Mail To:** Corporate University  
5637 N. Figarden Drive, Ste. 101, Fresno, CA 93722

### How did you hear about us?

☐ Flyer ☐ Brochure ☐ Internet  
☐ Word of Mouth ☐ Workshop

**Fax To:** 559.251.0234

**Email:** [enroll@mycorpu.org](mailto:enroll@mycorpu.org)

**Phone:** 559.227.6115

☐ Other: \_\_\_\_\_