



**CONTINUING EDUCATION BCB!7 F98 # REGISTRATION FORM**

Program Title/Name: Figuration Studio Spring 2012

Total Amount \$ 75.00

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Employer/Organization: \_\_\_\_\_

Address: \_\_\_\_\_  
(Employer or Home – Circle One)

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

Daytime phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email address: \_\_\_\_\_

Cancellation Policy

Refunds will be given, minus a processing fee (if applicable), if requests are submitted in writing to UW-L Continuing Education & Extension, 1725 State Street, 205 Morris Hall, La Crosse, WI 54601, and received at least two weeks prior to the start date of the program. No refunds will be made in the case of non-attendance or less than two weeks notice. Substitutions will be accepted.

Method of Payment

\_\_\_\_\_ Check – made payable to “UW-La Crosse”

\_\_\_\_\_ Mastercard \_\_\_\_\_ Visa \_\_\_\_\_ American Express

\_\_\_\_\_ Credit Card # \_\_\_\_\_ Exp. Date

\_\_\_\_\_ Name, as it appears on the card \_\_\_\_\_ Corporation/Organization, if corp. or organ. Purchasing card

Cardholders Signature: \_\_\_\_\_

Check/Money Order/Credit Card Options:

Mail: University of Wisconsin-La Crosse  
Continuing Education & Extension Registration  
1725 State Street – 205 Morris Hall  
La Crosse, WI 54601

Credit Card Only Payment Options or for questions regarding registration:

Phone: 608.785.6504; 1.866.895.9233  
Fax: 608.785.6547  
Online: [www.uwlax.edu/conted](http://www.uwlax.edu/conted)

Registration implies permission for photos, publicity and inclusion in a participant list unless CEE is notified in writing prior to the program.