

Course Registration Form Template

Student Information

- Name: _____
- Date of Birth: _____
- Current Address: _____
- Email: _____
- Phone: _____

Registration Details

- Select Course(s): (Please mark your choice with a check)
 - Course A
 - Course B
 - Course C
- Course IDs: _____
- Starting Date: _____

Previous Education

- Last Institution Attended: _____
- Degree Obtained: _____
- Year of Graduation: _____

Payment Method

- Select Payment Option: Visa MasterCard Other
- Amount Paid: _____
- Payment Date: _____

Agreement

I hereby register for the above-selected course(s) and agree to the terms.

- Signature: _____ Date: _____