



ROCKINGHAM
NOT YOUR TYPICAL COMMUNITY COLLEGE

ROCKINGHAM COMMUNITY COLLEGE
CONTINUING EDUCATION REGISTRATION FORM

PLEASE PRINT ALL INFORMATION

SSN _____ or Student ID Number _____

Last Name _____ First Name _____

Address _____ City _____

State _____ Zip _____

Birthdate _____ Gender Male Female

Home Phone _____ Cell/Mobile _____

Work Phone _____ Employment Status F/T OP/T Unemployed

Race: White Asian Black/African American American Indian/Alaskan Native Native American (circle all that apply)

Are you of Hispanic origin? Yes No

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED 13 14 15 16 17

Please check one: I certify that I am at least 18 years old and not enrolled in public school or
 I am under 18 and have provided a **Minor Release Form** to the Continuing Education office.

By signing below I certify that the given information is completed and correct.

Signature _____ **Date:** _____

Section Number	Course Title	Location	Registration Fee
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Selected Payment: MasterCard /Visa To pay with **MasterCard or Visa**: Go to www.ed2go.com/rockcc. Click Enroll Now, and follow the prompts. Call with any questions, 336.342.4261 ext. 2124
 Check
 Money Order

To register, complete this form and mail it along with a check or money order payable to RCC, PO Box 38, Wentworth, NC, 27375. Attn: Business Office, **PLEASE DO NOT SEND CASH.**