



NON-CREDIT & PERSONAL INTEREST REGISTRATION FORM

Student ID# (IF KNOWN)

Birth Date

Last Name

First

MI

Street Address

City

State

Zip Code

(Area Code) Telephone Number-Home

(Area Code) Telephone Number-Work

Email address

COURSE NAME	COURSE NUMBER	COURSE DATES	COURSE TIME	COST
TOTAL				

Payment: Total Cost is due upon registration. A Refund can be issued ONLY if you withdraw from a course ten or more days before the start of class. Credit card payments will be refunded to the credit card; cash and check payments will be refunded via a check from MCCC made payable to the student.

Credit Card Number: _____

CVV: _____ (3 digits # on back of card)

Card Expiration Date: _____

Amount to be charged: \$ _____

Cardholder Name: _____

OR Check Number: _____ payable to Mercer County Community College

OR Other Payment Type (e.g. - grant funding) _____

Mail registration form to Non-Credit Registration, 1200 Old Trenton Road, West Windsor, NJ 08550

or e-mail to noncredreg@mccc.edu. DO NOT SEND CASH.

PHONE: (609) 570-3311 / FAX: (609) 570-3883 / Website: <https://www.mccc.edu/workforce>