

# Community Education Enrollment



## MAIL-IN

Please include your checks or credit card info with the completed enrollment form. Mail to:  
Napa Valley College  
Upper Valley Campus  
1088 College Ave.  
St Helena, CA 94574



## PHONE-IN

Use our 24 hour voicemail registration service. See page 58 for procedures.  
Registration numbers are: (707)253-3070, ex.1301 or ex.1302 and (707)967-2900, ex.1301 or ex.1302.



## WALK-IN

You may register at Napa Valley College Upper Valley Campus office  
Monday-Thursday from 9am-7pm.  
1088 College Ave  
St. Helena.



## FAX IN

Fax registration is open 24 hours, 7 days per week. Be sure to fax your fully completed enrollment form with credit card information provided. Fax number (707) 967-2909.

## REFUND POLICY

Checks will be returned and no credit card charges will be made if requested classes/trips are already closed. Full refunds will be issued if a class is cancelled by the college. Requests for refunds on a class not cancelled by the college must be made at least five working days prior to the beginning of class. No refunds can be made on requests received after that date. A \$10 per person processing fee will be retained on ALL REFUNDS unless the class/trip is cancelled or meeting times are changed by the college. Refunds must be requested through the Community Education Office. For Trips and Tours, refunds are granted only if the trip is filled and the reservation can be resold by the Community Education Office.

# Community Education Enrollment Form

MAIL TO: Napa Valley College, Upper Valley Campus, 1088 College Ave, St. Helena, CA 94574 • FAX (707) 967-2909

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  Fall  Spring  Summer 20 \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (In.) (Other name used)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  Male  Female U.S. Citizen:  Yes  No

<p><b>Support Services for the Disabled</b> Please call (707)253-3080 to inquire about support services for the disabled. (TDD: 253-3085)</p>	<p>To pay by credit card, complete the following: Check one: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard Card No.: _____ Expiration Date: _____ Card Holder: _____</p>
<p>If registering for on-line classes, please list your E-Mail address here: _____</p>	

Registration No.	Course Name	Start Date	Fees

A separate check for each class registration facilitates prompt return in case of cancellation. Please be aware of our refund policy before enrolling.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_