P.O. Box 400 Phone: (207) 375-6605 Sabattus, ME 04280 Fax: (207) 375-4048

State	Zip	Zip	
Work Phone			
Email Address Birth		ate (MM/DD/YYYY)	
Course Name		Date/Session #	Fee
			\$
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? Attach a separate shee	t.	Total:	\$
☐ Cash ☐ Waiver/Gift Certificate (attached)			d)
Credit Card)	
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	Sabat	tus, ME 04280	
	rse Name Attach a separate shee MasterCard	Rirthdate ### Page 1	Birthdate (MM/DD/YYYY) Date/Session # Attach a separate sheet. Total: Waiver/Gift Certificate (attached) Check / Money Order (attached) Pay to the order of: Oak Hill Adult and Community Educ

Some courses require a minimum number of participants. We will notify you by phone in the event that a course is cancelled due to insufficient enrollment.