

577 Mount View Rd. Phone: 207-568-3426 Thorndike, ME 04986 Fax: 207-568-3471

| Name | | | | | |
|--|------------|--|---------------------------------|-----|--|
| Address | | | | | |
| City | State | | | | |
| Home Phone | Work Phone | | | | |
| Email Address Birth | | | thdate (MM/DD/YYYY) | | |
| Courses | | | | | |
| Course Name | | | Date/Session # | Fee | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| Want to add more courses? Attach a separate sheet. | | | Total: | \$ | |
| Payment | | | | | |
| ☐ Cash ☐ Waiv | | | ver/Gift Certificate (attached) | | |
| ☐ Credit Card ☐ Check | | | k / Money Order (attached) | | |
| Type: Visa MasterCard Pay to RSU | | | o the order of: #2 | | |
| □ F; | | | Mount View Rd. | | |
| | | | ndike, ME 04986 | | |
| Exp. Date: | | | | | |
| CVV (3-4 digits): | | | | | |
| Signature: | | | | | |

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.