


Registration Form:

 Mail to:

UW-Extension Registrations
Pyle Center
702 Langdon St., Dept. 104
Madison WI 53706-1487

 Call: 608-262-2451 (TDD 608-266-2370)

FAX:

608-265-3163 or toll-free 800-741-7416

Phone or fax registrations must be paid by credit card or purchase order

* are required fields

Program # _____

* Program title: _____

* Date(s): _____

* Location (fill in online for online courses):

Important - please enter the 3-digit UW# Code from the mailing label. UW# **OR** tell us where you heard about this workshop _____

Please complete the following registration form.

*First name: _____

Middle initial: _____

*Last name: _____

Suffix/Degree (e.g. Jr, PhD, MD): _____

Title/Position: _____

Company/Affiliation: _____

*Address: _____

*City: _____

*State/Province: _____

Country: (if not USA) _____

*Zip/Postal Code: _____

*Phone: _____

Fax: _____

*Email: _____

2. Fees

*Total: _____

3. Payment

payment by check enclosed: _____

Credit Card Type: _____

Credit Card # (no spaces): _____

Name on Card: _____

Expiration date: Mo/Yr

4. Comments/special needs:

5. Demographics

Voluntary information collected to enhance UW programming.

Gender: Female Male

Birthdate: _____

Heritage: _____

Occupational Area: _____

Are you enrolled in this program primarily for career purposes? (circle one)

Yes No

If you have a disability and desire accommodations, please advise us ahead of time. Requests are confidential. University of Wisconsin provides equal opportunities in employment and programming including Title IX requirements.