Glendon Extended Learning  |  Course Registration Form

- Mr.  ○ Mrs.  ○ Ms.  ○ Miss  ○ Dr.

**Date of Birth (Year/Month/Day): ____ / ____ / ____**

**Last Name:**  
**First Name:**

**Address:**  
**Unit/Apt #:**

**City:**  
**Province:**  
**Postal Code:**

**Country:**  
**Email:**

**Home Phone:**  
**Business Phone:**  
**Ext.:**

**Cell Phone:**  
**Fax:**

**Please Check for Discount:**

- ○ Senior 60+  
- ○ York / Glendon Alumnae Student #:
- ○ York / Glendon Employee #:
- ○ York / Glendon Current Student #:

What is your translation experience (are you a translator, student or project coordinator)?

<table>
<thead>
<tr>
<th>COURSE TITLE</th>
<th>START DATE</th>
<th>COURSE FEE $</th>
</tr>
</thead>
</table>

**TOTAL PAYMENT $**

Please tell us how you heard about us: E.g. Friend? Internet?

**PAYMENT**

Full payment must accompany this form. Please make **money order** payable to **York University**.

**Method of Payment:**  
○ Visa  ○ MasterCard  ○ Debit Card  ○ Money Order

**Card Number:**  
**Expiry Date:**

**Name of Cardholder:**

**Signature:**  
**Date:**

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Please complete form and fax to 416.487.6781 or mail to:

Glendon Extended Learning  
Glendon College, York University  
York Hall A112  
2275 Bayview Avenue  
Toronto, ON M4N 3M6

**Refund Policy:** If written cancellation is received on a business day prior to the second class, we will refund the tuition fee, less an administration charge of $50.