## ADULT REGISTRATION FORM - BEDFORD ADULT EDUCATION

## PLEASE PRINT NEATLY and COMPLETE ALL INFORMATION!

## A SEPARATE COMPLETED REGISTRATION FORM IS REQUIRED FOR EACH STUDENT AND EACH CLASS!

ass Name		Location		Start Date		Time
Name		E-ma	il			
Complete Address			City		State	Zip
Daytime Phone	Cell Phone					
Fee \$	Cash	Check #		Receipt#_		

<sup>\*</sup>Mail registrations to: Bedford Adult Education, 1135 Smith Road - Temperance, MI 48182\*