



**BIRMINGHAM COMMUNITY EDUCATION**  
**2436 W. LINCOLN STREET SUITE F101**  
**BIRMINGHAM, MI 48009**  
**248-203-3800**  
**FAX 248-203-3818**  
**WWW.COMMUNITYED.NET**

## REGISTRATION FORM/HOUSEHOLD OR STUDENT

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

BPS Resident Yes No      BPS Employee Yes No      Senior Yes No

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone (home): \_\_\_\_\_ (cell/work): \_\_\_\_\_

Credit Card: (Visa/MC only) \_\_\_\_\_ Exp: \_\_\_\_\_

Student information Last name: \_\_\_\_\_ First name: \_\_\_\_\_

BPS Resident Yes No      BPS Employee Yes No      Senior Yes No

Class Name: \_\_\_\_\_ Class #: \_\_\_\_\_ Fee: \_\_\_\_\_

Student information Last name: \_\_\_\_\_ First name: \_\_\_\_\_

BPS Resident Yes No      BPS Employee Yes No      Senior Yes No

Class Name: \_\_\_\_\_ Class #: \_\_\_\_\_ Fee: \_\_\_\_\_

Additional Information: \_\_\_\_\_