



ROCKINGHAM
NOT YOUR TYPICAL COMMUNITY COLLEGE

**ROCKINGHAM COMMUNITY COLLEGE
CONTINUING EDUCATION REGISTRATION FORM**

PLEASE PRINT ALL INFORMATION

Last 4 digits of SSN _____ or Student ID Number _____

Last Name _____ First Name _____

Address _____ City _____

State _____ Zip _____

Birthdate _____ Gender Male Female

Home Phone _____ Cell/Mobile _____

Work Phone _____ Employment Status F/T OP/T Unemployed

Race: White Asian Black/African American American Indian/Alaskan Native Native American (circle all that apply)

Are you of Hispanic origin? Yes No

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED 13 14 15 16 17

Please check one: I certify that I am at least 18 years old and not enrolled in public school or
 I am under 18 and have provided a **Minor Release Form** to the Continuing Education office.

By signing below I certify that the given information is completed and correct.

Signature _____ Date: _____

Section Number	Course Title	Location	Registration Fee
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Selected Payment: MasterCard /Visa To pay with **MasterCard or Visa: Go to www.rockinghamcc.edu •Click on **Continuing Education** •Click **Register Online** Here For Continuing Education Courses • Click on **Register and Pay** for Continuing Education Classes • Key in **Course Code** •Then click **submit** •On the left **select the course** •Click **submit** •Complete information and follow prompts for payment.**

Check

Money Order

To register, complete this form and mail it along with a check or money order payable to RCC, PO Box 38, Wentworth, NC, 27375. Attn: Business Office, **PLEASE DO NOT SEND CASH.**