

Dexter Community Education CLASS REGISTRATION FORM

TO REGISTER FOR A CLASS: Please fill out both parts of the registration below. If you already have an account set up with Dexter Community Education, you don't need to fill out Part 1 again.

You can register three ways:

1. **ONLINE** at www.onlinedexter.com if your account is in our database and you have your password. Online registration closes one week before a class starts.
2. **MAIL:** Send this form with check or charge information to Dexter Community Education, 3060 Kensington, Dexter, MI 48130
You may also deliver registrations to our office, located in the lobby of the Dexter Pool on Kensington Street.
3. **FAX:** Charged registrations may be faxed to 734-426-9515

If you need assistance or have questions, call Dexter Community Education at 734-424-4180.

Part 1: INDIVIDUAL/FAMILY ACCOUNT REGISTRATION

You only need to fill out this part once. Once the account information is entered in our data bank, it will be easily accessible for any future registration. If you have already registered your family, thank you!

HEAD OF HOUSEHOLD

Full Name _____ Birthdate _____ Male ___ Female ___

FAMILY INFORMATION

Street Address _____ City/Zip _____

Home Phone (_____) _____ Cell / WorkPhone (_____) _____

Primary email (print) _____

ALL ADDITIONAL FAMILY MEMBERS (include students below)

Full Name _____ Birthdate _____ Male ___ Female ___

Full Name _____ Birthdate _____ Male ___ Female ___

Full Name _____ Birthdate _____ Male ___ Female ___

After your family account data is entered, we will email you a password you can use for future online registrations.

Part 2: CLASS REGISTRATION

Registrant's Name	Class Name	Class Code	Fee	Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Photographs are sometimes taken in our programs and may be used in Dexter Community Education's promotional material (brochures, fliers, website, etc.) Children are never identified by name. Contact our office if you would prefer your child not be photographed. I certify that I am aware of the inherent risks in the above activity, that my child is physically capable of performing the normal activities related to the activity and that I assume full responsibility for accidents arising out of circumstances not under control of the Dexter Community Schools and/or its agents.

Parent or Guardian's Signature _____

Print Cardholder's Name _____		Date Card Expires _____																							
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Pin number (back of card) _____		Cardholder's Signature _____																							