

# HS 300 IRP Enrollment Form Carmel, IN



Please be sure to carefully read our Student Policies in the "Become A Student" section of [TheAmericanCollege.edu](http://TheAmericanCollege.edu)

## Instructions:

- Credit card: please fax completed forms to 610-526-1545.

**Your Key Data** (Must match your credit card information. UPS cannot deliver to a PO box)

Legal Name: \_\_\_\_\_  Male  Female

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Company Affiliation: \_\_\_\_\_

Agency/Firm: \_\_\_\_\_

Street: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Primary E-Mail: (required) \_\_\_\_\_ Alternate E-Mail: \_\_\_\_\_

I am a new student  I am a returning student My student number is \_\_\_\_\_

Do you have an insurance license?  Yes  No If yes, what is your state of licensure and your license number?  
 State: \_\_\_\_\_ License Number: | | | | | | | | | | | | | | | | | | | | | |

I request CE credit for my course(s)  Yes  No CE Fee \$ \_\_\_\_\_ (If left unchecked, CE will not be processed)

Please include the amount in the Fee Summary on the reverse side of this form.

To review the most current CE fees, please visit [TheAmericanCollege.edu/CE](http://TheAmericanCollege.edu/CE)

Course Number	Course Name/Moderator	Start Date	Tuition
HS 300	Financial Planning: Process and Environment (Moderator: Kevin Lynch)	April 13 - 15, 2012	\$799

Total: \$ \_\_\_\_\_

## Fee Summary

Admission Fee (all new students; one-time; nonrefundable): \$140	\$ _____
Tuition	\$ _____
Shipping/Handling (\$25 within contiguous U.S.; nonrefundable; see <a href="http://TheAmericanCollege.edu">TheAmericanCollege.edu</a> for fees outside contiguous U.S.) You can expect your study materials to arrive 10 business days after we process your paid registration	\$ _____
Continuing Education Fee (if applicable; nonrefundable)	\$ _____

**Total All Fees** **Total \$** \_\_\_\_\_

## Method of Payment

- Check (Make Check Payable to The American College)  
 Credit Card  VISA  MC  AMEX  DISCOVER

Account Number: | | | | | | | | | | | | | | | | | | | | | | Exp. Date | | | | |

Signature \_\_\_\_\_ Total amount enclosed and/or charged: \$ \_\_\_\_\_

*This signature serves as my agreement to The College's refund policies and authorization to charge my credit card:*