SOUTHERN CRESCENT TECHNICAL COLLEGE

BUSINESS & INDUSTRY REGISTRATION

OFFICE USE ONLY **INVOICE #** _____

CHECK # _____

Receipt # _____ **Date** _____

Amount _____ **Initial** _____

Email all forms to angela.weatherford@sctech.edu

COMPANY BILLING INFORMATION

Company _____ **# of Employees** _____ **Telephone** _____

Street Address _____ **City** _____ **State** _____ **Zip Code** _____

Employer Identification Number (FEIN) _____

Credit Card # _____
(Visa/MasterCard/Discover)

Exp. Date

Card Holder Name _____

Billing Address _____

3 digit security code on back of card

Signature _____

COURSE DATA

DATE OF COURSE	NAME OF COURSE	HOURS	COST

STUDENT INFORMATION

Last Name _____ **First Name** _____ **MI** _____

Street Address _____ **City** _____ **State** _____ **Zip Code** _____

County Code _____ Butts = 018 Clayton = 031 Fayette = 056 Fulton = 060 Henry = 075 Jasper = 079
Lamar = 085 Meriwether = 099 Pike = 114 Spalding = 126 Talbot = 130 Taylor = 133
Upson = 145

Phone number _____

License # _____ (Plumbers, Electrical, or Drivers' – pertaining to the course taken) **DOB** _____ **SS #** _____
(Only last four digits)

Male _____ **Female** _____ Ethnic Background: Hispanic/Latino Yes ☐ No ☐
If no, please select one or more: American Indian or Alaskan Native ☐ Asian ☐
Black or African American ☐ White ☐
Native Hawaiian or other Pacific Islander ☐

Email _____

As set forth in full in the Catalog/Student Handbook, Southern Crescent Technical College is an Equal Opportunity Institution.

Revised: 02/18/16

Refund Policy: 100% within 72 hours of class start date; 100% automatic refund if class is canceled. No refund otherwise.

ECONOMIC DEVELOPMENT DIVISION

Griffin Campus 770-228-7364 FAX 770-233-5510 Flint River Campus 706-646-6151 FAX 706-646-6194