

REGISTRATION FORM

Email completed forms to: chrisbiegun@tillamookbaycc.edu
 Mail completed forms to: 4301 Third St. Tillamook, OR 97141

NON-CREDIT
 YEAR: 24-25 TERM: _____

Part A: Course Registration Requests

1	Prefix - 4-digit number – section	Course Title:	Tuition	Fees
	Prefix - 4-digit number - section	Course Title:	Tuition	Fees
	Prefix - 4-digit number - section	Course Title:	Tuition	Fees

Part B: Student Information

2	TBCC ID Number	Date of Birth (MM/DD/YY)	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
3	Last Name		Other Names Used		
4	First Name		Middle Name		
				<input type="checkbox"/> A Gender Not Listed	<input type="checkbox"/> Decline to Answer

Part C: Contact Information

5	Email Address				
6	Mailing Address		City	State	ZIP
7	Mobile Phone Number		Alternate Phone Number		

Registration Drops

1	Prefix - 4-digit number - section	Course Title:
2	Prefix - 4-digit number - section	Course Title:

TBCC uses this information to better understand and serve our students:

Do you consider yourself to be Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	Select one or more of the following racial categories to describe yourself: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Do you Speak a language other than English in your home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a veteran of the US Military <input type="checkbox"/> Yes <input type="checkbox"/> No	

Part C: Registration Confirmation

8	My enrollment with Tillamook Bay Community College will signify my consent to and acceptance of all policies and procedures governing my enrollment, including financial liability. I understand that physical education classes, lab activities, and some courses may involve physical activity and exertion. By signing this agreement I agree to hold Tillamook Bay Community College harmless for any injury incurred as a result of my participation in these activities.	
Signature		Date (MM/DD/YY)

DISCLOSURE STATEMENT

RACE/ETHNICITY: In compliance with State and Federal reporting requirements the College must seek to identify the ethnic background of the students. TBCC is legally required to maintain the confidentiality of this information. You may decline to provide the data without in any way prejudicing your enrollment.

DISABILITY: TBCC affirms the right of all individuals to equal opportunity in education and employment and will provide reasonable accommodations to individuals with disabilities. For assistance contact Disability Support Services (ext. 1125) or Affirmative Action Office (ext. 1520) at TBCC (503) 842-8222