Student Information

*Date of Birth (month/day/year): _____ / _____ / _____   ***Did you attend classes at NCC before?**   Yes   No

*Email Address: _____

*Last Name: _____

*First Name: _____   **Middle Initial:** ____

*Home Street Address or PO Box: _____

*City: _____   ***State:** _____   ***Zip Code:** _____

*Primary Phone: _____   **Alternate Phone:** _____

County in which you reside: _____

*School district where you live:

Employer Information

Employer Name: _____   **Employer Phone:** _____

Employer Address: _____

Course Information

Course Code & Sec.	Course Title	Meeting Days							Start Date/Time
		Su	M	T	W	R	F	S	

Course Fee: _____

Payment - INDIVIDUALS

Credit card, check or money order made payable to:

Northampton Community College, Bursars Office
3835 Green Pond Road
Bethlehem, PA 18020

Payment - EMPLOYERS (check one)

Invoice

Credit card

Credit Card Information

Name on Card: _____   **Card #:** _____

Expiration Date: ____ /____   **Security Code:** _____

In consideration of this registration and enrollment in Northampton Community College, I, the undersigned student (or parent/guardian of minor child), do hereby agree to assume and pay any and all costs and charges including collection costs and attorney fees for delinquent accounts.

*Student Signature: _____

Please return completed form with payment via email to safety@northampton.edu or mail to Northampton Community College, 511 E. Third St., Room 512, Bethlehem, PA 18015. **Form must be received no later than one week prior to course start date.**