



Department of Technology Services
Class Registration Form

| | | | |
|------------------------------|--|---------------------------|--|
| Name: | | | |
| School or Department: | | | |
| Job Title: | | Work Phone Number: | |
| Email Address: | | | |

| Class Title: | Date of Class: | Location of Class: | Time of Session: | Fee (if applicable): |
|---------------------|-----------------------|---------------------------|-------------------------|-----------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Instructions:

1. Fill out Registration Form (one person per form).
2. You may fax this registration form to (720)-423-3774 or you may register by calling the registration line at (720)423-3884.
3. You will receive a confirmation by email, if you do not have a district email account set up it will be sent to your school secretary for you. You should receive a confirmation within two business days of your request. If you do not receive one, please contact the registration line.