



__Payment By Check__
Course Registration

Please print your information.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Course Title:

Price:

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total: _____ \$ _____

Please mail your completed form with a check made payable to Amelia Lifelong Learning.
You will be registered when we receive your check.

**Amelia Lifelong Learning
P.O. Box 15124
Fernandina Beach, FL 32035**

After your check has been received and deposited, an email will be sent to the address you have provided confirming your enrollment, including course name, dates, time, and location.
If you do not receive a response in 10 business days or if you have questions regarding your registration, you may email us at info@amelialearning.com.

Thank You! We look forward to seeing you in class.