



# 4 Easy Ways to Register

## Register by Mail

Complete the registration form below. Send in the form with your credit card information or a check made payable to Blackhawk Technical College for the exact amount.

## Register by Fax

Complete the registration form below with your Visa or MasterCard information. Fax to 608-743-4407 (our Registration Office). To have your employer billed for the seminar cost, a letter of authorization for billing must be faxed with your registration form. Please include the proper billing address and the person the invoice should be directed to.

## Register on the Web

To register online, visit our web site, [www.blackhawk.edu](http://www.blackhawk.edu). Click on Explore Programs, then Business & Community Development, Community Education, and scroll to the "Register Now" link.

## Register in Person

You may register in person at either of our Registration Offices during the hours listed below.

Central Campus  
Monday - Thursday 8:00 am - 7:00 pm  
Friday 8:00 am - 4:30 pm

Monroe Campus  
Monday - Thursday 8:00 am - 9:00 pm  
Friday 8:00 am - 4:30 pm



### NON-CREDIT REGISTRATION

6004 South County Road G  
P.O. Box 5009  
Janesville, WI 53547-5009

Registration Numbers  
Phone: (608) 757-7661  
Fax: (608) 743-4407

Print Form  
(Copy as needed)

STUDENT ID NUMBER		LAST NAME		FIRST NAME		MIDDLE					
STREET ADDRESS				CITY OR TOWN		STATE		ZIP CODE			
COUNTY OF RESIDENCE		<input type="checkbox"/> CITY of <input type="checkbox"/> VILLAGE of <input type="checkbox"/> TOWNSHIP of		HOME PHONE ( )		COMPANY					
DATE OF BIRTH		SEX		RACE (check all that apply)				ASIAN ORIGIN		ETHNIC CODE	
Month      Day      Year		<input type="checkbox"/> Female <input type="checkbox"/> Male		<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander				<input type="checkbox"/> Vietnam <input type="checkbox"/> Laos <input type="checkbox"/> Cambodia <input type="checkbox"/> Other		Hispanic/Latino <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> HIGH SCHOOL GRADUATE      YEAR <input type="checkbox"/> GED      19____ 20____ <input type="checkbox"/> HSED		NAME OF HIGH SCHOOL				CITY AND STATE OF HIGH SCHOOL					
HIGHEST GRADE COMPLETED AT ENROLLMENT (Circle One)										BELOW 6    6    7    8    9    10    11    12    13    14    15    16    17    Over 17	
(CRN)		COURSE NUMBERS (9)			COURSE TITLES						

Student Signature

Date

Revised 3/2010