

ONLINE SEMINAR COURSE ENROLLMENT FORM

<p style="text-align: center; font-size: 1.2em; margin: 0;">THE CATHOLIC DISTANCE UNIVERSITY</p> <p style="text-align: center; font-style: italic; margin: 0;"><i>Life Long Learning in the Faith Through Distance Education</i></p> <p style="text-align: center; font-size: 0.8em; margin: 5px 0 0 0;">120 East Colonial Highway, Hamilton, VA 20158-9012; Phone: (540) 338-2700; Fax: (540) 338-4788; E-mail: cdu@cdu.edu; Web: www.cdu.edu</p>	<p style="text-align: center; font-size: 0.8em; margin: 0;">PLEASE DO NOT WRITE IN THIS SPACE</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p style="margin: 5px 0 0 0;">DATE ACCEPTED _____</p>
---	--

DIRECTIONS: To enroll in an online interactive seminar, please print or type all sections of this form. Include payment or credit card information and remember to sign the form. Please mail or fax (credit card only) to CDU.

A. CONTACT INFORMATION

TITLE: Mr. Mrs. Ms. Miss Doctor Sister Brother Deacon Rev. Msgr. Other Title (please specify): _____

NAME: _____ SOC. SEC. #: _____ - _____ - _____ STUDENT ID (if applicable): _____

First Middle Last Suffix

ADDRESS: _____ E-MAIL ADDRESS: _____

CITY: _____ STATE: _____ ZIP/POSTAL: _____

DIOCESE: _____ DOB: _____ SEX: M F

PHONE Home: _____ Business: _____ Cell: _____ Fax: _____

HIGHEST EDUCATION COMPLETED: HSD AA BA/BS MA/MS PhD Other: _____

WHERE DID YOU FIRST HEAR ABOUT CDU? _____

B. COURSES & TUITION

Course Number	Title	Graduate Credit <input type="checkbox"/> \$390	Tuition Undergraduate Credit <input type="checkbox"/> \$239	Con Ed Noncredit <input type="checkbox"/> \$143

PAYMENT INFORMATION

Full Tuition Payment with Application----- \$ _____

Voluntary Tax Deductible Contribution----- \$ _____

NOTE: CDU is a nonprofit educational institution. Tuition covers only a portion of the cost of CDU's programs. Your tax-deductible donation will be used for scholarships and new courses.

Total Enclosed (US currency only)\$ _____

C. PAYMENT INFORMATION

PAYMENT TYPE: Check/Money Order VISA MasterCard American Express Discover Card

NAME (as it appears on card): _____

CARD #: _____ EXPIRATION DATE: _____

SIGNATURE: _____ TOTAL: \$ _____

YOUR SATISFACTION POLICY

We believe you will be completely satisfied with your course. If for any reason you discontinue your studies during the period of enrollment (three (3) weeks), the University has established this liberal cancellation and refund policy for your protection.

A student may terminate enrollment at any time by notifying the University (preferably in writing).

If CDU is notified of cancellation within five (5) calendar days after midnight of the day on which the enrollment agreement is accepted, an applicant requesting cancellation in whatever manner within this time will be given a refund of all money paid to CDU.

From five (5) calendar days after midnight on the day on which the enrollment agreement is accepted and until the time the University receives the first completed lesson assignment from the student, upon cancellation, the University is entitled to a registration fee of \$75 or 20% of tuition, whichever amount is higher, not to exceed \$200.

After the University receives the first completed lesson assignment and until the student completes half of the course, if the student requests cancellation, the school shall be entitled to the registration fee and charge which shall not exceed the following:

- Up to and including completion of the first 10% of the course, 10% of the tuition after deducting the registration fee.
- After completing more than 10% of the course and up to and including completion of 25% of the course, 25% of the tuition after deducting the registration fee.
- After completing more than 25% of the course and up to and including completion of 50% of the course, 50% of the tuition after deducting the registration fee.

If the student completes more than half of the course, the University shall be entitled to retain the total course tuition.

SIGNATURE: _____

DATE: _____