



1088 College Avenue
St. Helena, California 94574

Office # (707) 967-2900
Fax # (707) 967-2909

Class/Trip Registration Form

Register by Mail, Email, Phone, Fax, or Walk-in

___ Spring ___ Summer ___ Fall 20___

Name _____
Last First MI Other Name Used

Mailing Address _____
Number & Street City State Zip

Home Phone (_____) _____ - _____ Cell (_____) _____ - _____

Male ___ Female ___ Date of Birth ___/___/___ Student ID#: _____

Email: _____

To assist the college in complying with federal and state requirements and to provide needed services, you are urged to supply the following voluntary information. This information is confidential and will not affect your admission status

Highest Level of Education: <input type="checkbox"/> High school diploma / GED <input type="checkbox"/> Currently enrolled grade K-12 <input type="checkbox"/> Currently enrolled in adult school <input type="checkbox"/> Not a high school graduate and not currently enrolled in high school		<input type="checkbox"/> Certificate of high school <input type="checkbox"/> Associate Degree (AA/AS) <input type="checkbox"/> Bachelor's Degree (BA/BS) <input type="checkbox"/> Unknown		Education Goal: <input type="checkbox"/> Personal interest <input type="checkbox"/> Improve basic skills / ESL <input type="checkbox"/> Move from non-credit to credit coursework <input type="checkbox"/> Earn a vocational certificate <input type="checkbox"/> Discover/formulate career interest, plans, goals		<input type="checkbox"/> Prepare for a new career <input type="checkbox"/> Advance a current job / career <input type="checkbox"/> Maintain a certificate or license <input type="checkbox"/> Complete high school / GED <input type="checkbox"/> Undecided	
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Registration #	Class Name	Start Date/Time	Location	Fees

Total Fees: \$ _____

Payment Information

Cash Check (Payable to Napa Valley College) MasterCard Visa Discover American Express

Credit Card Number _____ Expiration Date ___/___ Security code _____
(3 or 4 digits)

Authorized Signature _____ Card Holder _____