

REGISTRATION DATES & TIMES

CLASS FEES:

- Class fees are from \$9 - \$16 depending on number of sessions and total class hours.
- Some classes require a material fee to be paid at time of registration.
- One child 12 or under free when attending the same class with a paid adult (½ price with UMKC Student).
- Senior citizens (65 and up) and UMKC Faculty & Staff receive the early bird price whenever they register.
- **FREE TO UMKC STUDENTS***

Early Bird Prices *begin when you pick up a catalog and continue through Jan. 19th.*

Save \$1 off first class and \$2 off subsequent classes

WE OFFER 5 WAYS TO REGISTER:

(Office Closed: Martin Luther King's Birthday, Mon., Jan. 15)

1) By Mail

(checks or Visa/Mastercard/Discover)

Begins when you find a catalog—Mail to:

Community: 5327 Holmes, KCMO, 64110

Make checks out to Community

Mail processed on a first come, first served basis. You will be notified only in the event of a class change or if the class is full.

2) In-Person

(currency, checks or Visa/Mastercard/Discover)

Sign-up Party Specials—

Tuesday, January 16th, 6:00-8:00 PM at The Writers Place, 3607 Pennsylvania, KCMO. The registration fee of \$2 is waived and you still receive the early bird discount.

Regular Registration Hours—begins weekdays, Monday, January 8th–January 16th, from 10:00 a.m.-5:00 p.m., Wednesday, January 17th–19th, from 10:00 a.m.-6:00 p.m., Starting Monday, January 22nd, 10:00 a.m.-5:00 p.m. Community Office, 5327 Holmes, 2nd floor.

3) By Phone

(Visa/Mastercard/Discover)

Regular Registration Hours: begins weekdays, Monday, January 8th–January 16th, from 10:00 a.m.-5:00 p.m., Wednesday, January 17th–19th, from 10:00 a.m.-6:00 p.m., Starting Monday, January 22nd, 10:00 a.m.-5:00 p.m.

Call 816-235-1448; only Visa/Mastercard/Discover accepted. Please have credit card number and expiration date handy when you call. Confirmation of your registration is at the time you call. Hearing Impaired: Call 1-800-735-2966 TT; 1-800-735-2466 (voice)

4) By Fax—24/7

(Visa/Mastercard/Discover)

Begins when you find a catalog. Fax your completed registration form with Visa/Master/Discover card info to **816-235-5612**, 24 hours every day. You will be notified only in the event of a class change or if it's full.

4) Online—24/7

(Visa/Mastercard/Discover)

Fill out the online registration form at www.umkc.edu/commu. We will call you after you submit it. You'll still need to pay over the phone within 24 hours.

Refund policy

Cash refunds are not issued unless Community or the Convener cancels the class. Letters of credit can be issued if you cancel 5 working days before the class. Material fees will be refunded only if you cancel 10 working days before a scheduled class.

REGISTRATION FORMS

Mail to: Community, 5327 Holmes, KCMO 64110

__New Address

Name _____

Address _____

City _____ State _____ Zip _____

Phone: Day (____) _____ - _____ Night (____) _____

E-mail address _____

VS_MC_DC #: _____ - _____ - _____ Exp.Date ____/____

Course #	Course Title	Class Fees
1)		
2)		
3)		
4)		
5)		

I am presently a UMKC Student
(Pay ONLY material fees)
Student ID #: _____ - _____ - _____

I am interested in volunteering

I am interested in teaching
Subject: _____

Class Fee Total	
Donation (tax deductible and greatly appreciated)	
Registration Fee (due once per person per catalog)	\$2.00
Total Sent	

COMMUNITY LIABILITY WAIVER (Must Sign to Register)
I understand that Community is not an academic program of the University of Missouri-Kansas City. Its conveners are not employees of Community or UMKC. Community makes no representation as to, nor is responsible for, class content, manner of presentation, time or location. The undersigned releases the Curators of the University of Missouri and Community staff from any liability for personal injury or property damage sustained while attending or otherwise being involved with classes offered through Community.

Signature _____ Date _____

Please use one form for each person you are registering

__New Address

Name _____

Address _____

City _____ State _____ Zip _____

Phone: Day (____) _____ - _____ Night (____) _____

E-mail address _____

VS_MC_DC #: _____ - _____ - _____ Exp.Date ____/____

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Signature _____ Date _____