FALL/WINTER 2011/2012 REGISTRATION FOR DCE

Student ID #: _____ Advisor: _____

On Campus Students Please email dce@linfield.edu for registration form

Name: _____ Date of Birth: _____

Last *First* *Middle*

Day Phone: (_____) _____ Email: _____

Ext.

Name of Linfield degree or certificate you are pursuing: _____

Please fill out below if:
- ❑ you are a *new* Linfield College student.
- ❑ you have changed your address or phone number.

Address: _____

Street *City* *State* *Zip*

Telephone: (_____) _____ (_____) _____

Home *Work* *Ext.*

Dept and #	Section	Fall Course Title	Hrs.	Credit or Audit	Location
Dept and #	**Section**	**Winter Course Title**	**Hrs.**	**Credit or Audit**	**Location**

Fall Tuition _____ credits @ $375 per credit &/or _____ audit credits @ $187.50 per credit $ _____

or Deferred Plan _____ credits @ $187.50 per credit (balance due via Deferred Payment Plan - MUST use form on page 16) $ _____

Winter Tuition _____ credits @ $375 per credit &/or _____ audit credits @ $187.50 per credit $ _____

Late Registration Fee - $50 (for registrations received after Tuesday, September 6, 2011 for Fall; see page 2).....+ $ _____

Online and/or other fees (see individual class listings).....+ $ _____

Make checks payable to: Linfield College

Total Amount Enclosed $ _____

Credit Card - Third Party Payment

VISA MasterCard

Card Number: _____

VISA or MasterCard cards only

Exp. Date: _____ Security Code _____ Amount: $ _____

FOR OFFICE USE ONLY

Student ID # _____

Check # _____

Amount $ _____

Financial Aid

Have you submitted all required financial aid documents (FAFSA) and the Linfield application for financial aid (LAFA)? ❑ Yes

Month/Year of anticipated graduation _____

Veterans' Benefits

Have you applied for Veterans' Benefits? _____ Chapter Number

❑ Yes

YOU MUST SIGN BELOW IN ORDER FOR US TO PROCESS YOUR REGISTRATION

I PROMISE TO PAY Linfield College (or its agent) at 900 SE Baker, McMinnville, OR 97128-6894 tuition and ALL applicable fees and Educational Expenses on or before Nov. 30, 2011* for Fall, and if applicable, on or before Jan. 14, 2012* for Winter Term, or, by then, said sum will be paid by certain pending Financial Aid or Veterans' benefits. If not paid when due, this note shall be in DEFAULT and a $25.00 late fee will be assessed per each late payment per month. A 1% Per Month Service Charge will be applied to any unpaid balance per school policy. I understand that if this note is in default, I may not be allowed to register for further classes or receive grades or transcripts and I may be denied other services. I agree to pay all accrued service charges, reasonable attorney fees, costs, disbursements and collection fees (those fees in addition to attorney fees which Linfield College may have incurred in attempting to collect the debt through a collection agency or other means), and any other interest, charges, expenses or penalties allowed by law. (This note is signed as a sealed instrument.) *Deadline for financial aid payments only.

SIGNATURE: _____ DATE: _____

Register August 2 - January 3, 2011 • 800-452-4176 or 503-883-2447 • Fax: 503-883-2369

www.linfield.edu/dce