

REGISTRATION FORM

Georgetown University
Institute on Sacred Scripture
School of Continuing Studies
Box 571006
Washington, DC 20057-1006

Title: _____ Name: _____

Order: _____ Social Security Number: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Day Phone: _____ Evening Phone: _____

E-Mail Address: _____

Date of Birth: _____ Sex: Male Female

Employer: _____ Occupation: _____

Race (*Optional disclosure for federal reporting purposes*):

(W) White (O) Asian or Pacific Islander (I) Alaska Native/American Indian
 (B) Black (S) Hispanic (F) Non-U.S. Citizen

TUITION: \$350

*HOUSING: Copley Single Room - \$55/night Village C Single Room - \$55/night
 Copley Double Room - \$27.50/night Village C Double Room - \$27.50/night

**A one-time \$10 linen charge will be added to housing costs.*

Preferred Roommate (double rooms): _____

Date of Arrival: _____ Date of Departure: _____

Or No university housing

PARKING: \$60 yes no

AMOUNT ENCLOSED OR TO CHARGE:

\$350 (tuition) + _____ (housing*) + _____ (parking) = _____ (total)

**Do not forget to include \$10 linen charge.*

CHECKS: Make checks payable to *Georgetown University*

Credit Cards: Visa Mastercard American Express

Card number: _____ Exp. Date: _____

Signature authorizing charge: _____