ALL Registration Form Fall 2023

If possible, please download and complete this form on your computer before printing.

Academy for Lifelong Learning		For Office Use Only				
Cape Cod Community College	Invoic		e# Amount			
2240 Iyannough Road West Barnstable, MA 02688-1599		Trans/Ck#	<u>L</u>	s		
NEW this semester: Mail your completed form with your che Email this form to allccregister@gmail. by credit card online by selecting the "I	com and pay the memi	ve address. OF bership fee plus	₹ a \$5 handliı	ng fee (\$11() total)	
Name		Date of Birth				
Street						
City	State	ZIP	New address?			
Phone (Home)	(Cell)		New phone #?			
Email			New Email Address			
Emergency Contact	Phone		Relationship			
FIRST TIME Member? How did yo	ou learn about ALL?_					
Please contact me about "coordinato	r" opportunities. Y_	N				
	ses, two 12-week cour ternates in case your in order of preference	preferred course	es are full.		urses.	
	: Course number suffi Zoom HC=Hybrid Cla					
	Preferred Cours	es				
(Ofc. Use) Course # Location C,Z,HC,HZ	Course Name	Day/Time	12 wk	1 st 6 wk	2 nd 6 wk	
1. ALL						
2. ALL						
3. ALL						
4. ALL						
Alte	rnate Courses (if prefe	erred are full)				
1. ALL						
2. ALL				-		
3. ALL						

The ALL Registration process will open on Monday August 21st, at 9 am for registration forms received by August 18th. No preference will be given to early postmarks or delivery dates.