

## Choose the way you would like to register:

- ON THE WEB** – Use our new web registration process. Go to the website [www.fanshawec.ca](http://www.fanshawec.ca) and follow the instructions to enroll on-line. You'll need to use a Visa or Mastercard number to pay. If you know your student number, have it ready.
- BY MAIL** – Fill out the registration form and mail it to Fanshawe College, Office of the Registrar, Room E1012, 1001 Fanshawe College Blvd., P.O. Box 7005, London, Ontario, N5Y 5R6. Be sure to include either your credit card number, a cheque or money order.
- BY FAX** – Fill out the registration form and fax it to Fanshawe College at 519-453-5021. Be sure to include your credit card number.
- IN PERSON** – Bring your completed registration form, along with payment to Fanshawe College, Office of the Registrar, Room E1012, 1001 Fanshawe College Blvd., London, Ontario.

# Registration Form

Information: 519-452-4444 • Fax: 519-453-5021

**Fanshawe College Registrar's Office** – Room E1012, 1001 Fanshawe College Blvd., P.O. Box 7005, London, Ontario, N5Y 5R6  
**Registrar's Office Hours of Operation** – Monday/Tuesday/Thursday 8:30am to 9:00pm; Wednesday 9:30am to 9:00pm;  
 Friday 8:30am to 4:00pm; Saturday 9:00am to 12:30pm

Have you ever taken a course at Fanshawe College? Yes  No  Student Number: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: D \_\_\_\_\_ M \_\_\_\_\_ Y \_\_\_\_\_ Male  Female

*Please ensure that we have your current address on file.*

Course Name & Section Number (eg. ACCT-1004-20LC)	Course Name	Start Date / Time	Location (eg. London, Woodstock, Simcoe, St. Thomas, Strathroy)	Total Fee

## Method of Payment:

Cash       Cheque       Money Order

MasterCard       Visa       Interac

*Registrations will not be processed without full payment.*

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiry Date

\_\_\_\_\_  
Card Holder's Name (PLEASE PRINT)

\_\_\_\_\_  
Card Holder's Signature

### FREEDOM OF INFORMATION AND PROTECTION OF INDIVIDUAL PRIVACY

The information on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002, Ontario Regulation 34/03. The information is used for administrative and statistical purposes of the college and/or the ministries and agencies of the Government of Ontario and the Government of Canada. For further information, please contact the Registrar, Fanshawe College, PO Box 7005, London, ON, N5Y 5R5, telephone 519-452-4277.