

Mail-In Registration Form • CSUN • The Tseng College

Name _____

Title _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Fax Number _____ Date of Birth* _____

E-Mail Address _____

Social Security Number **OR** Birthdate **OR** CSUN ID # _____

METHOD OF PAYMENT: _____

Check (Make check payable to California State University, Northridge)



Exp. Date _____

Sponsor (third party). _____
Attach Sponsorship Form. See the web site, <http://tsengcollege.csun.edu/sponsorships.html>

Card Number _____

Print Name of Cardholder _____

Authorizing Signature _____

Date _____

Please enroll me in the following courses.

Subject & Catalog Number _____

Term & Class Number _____

Fee \$ _____

Subject & Catalog Number _____

Term & Class Number _____

Fee \$ _____

Payment Amount \$ _____