



**OFFICE OF SPECIAL PROGRAMS AND CONTINUING EDUCATION  
TEACHER ENHANCEMENT PROGRAM**

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## Course Application Form

Please follow carefully the specific registration instructions. Registration is not complete nor is a place in the class reserved for you until full payment has been received. You may pay for your registration by mail with a check or by credit card.

**To pay by mail with a check** Print this form and mail it with your payment. Make your check payable to **Centennial Canoe Outfitters**. Mail the completed form to the address below.

**To pay by credit card** Print this form and ensure you have entered your credit card information. You may mail or fax the completed form to the address/number below.

Centennial Canoe Outfitters  
PO Box 3365  
Centennial, CO 80161-3365

Phone 720.283.0553  
Fax 303.347.8296

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**Course Name** \_\_\_\_\_ **Course Number** \_\_\_\_\_

**Location** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**Your Name** \_\_\_\_\_

**Gender**  Female  Male **Date of Birth** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**School Phone** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**Preferred Email Address** (please print clearly) \_\_\_\_\_

**Your School** \_\_\_\_\_

**Grade Levels You Teach** \_\_\_\_\_

*Do not provide credit card information if you are paying by check*

**Credit Card Type** (MasterCard, Visa accepted) \_\_\_\_\_

**Card Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Cardholder Name** \_\_\_\_\_ **Amount To Charge** \_\_\_\_\_