



Non-Credit Registration Form
 Leesburg Campus (352) 365-3556
 South Lake Campus (352) 243-5722
 Sumter Campus (352) 568-0001

Make Check Payable to: LSCC
Mail to: Lake-Sumter Community College
 9501 U.S. Highway 441
 Leesburg, FL 34788-8751
 Attn: Business Office
For Credit Card or Debit Card Payment
Fax to: 352-435-5044 (See below)

**Please
Print
Clearly**

E-MAIL ADDRESS (PRINT CLEARLY) _____ *SOCIAL SECURITY NUMBER _____ (OFFICE USE ONLY) STUDENT ID _____

LAST NAME _____ FIRST NAME _____ MIDDLE/MAIDEN _____

LOCAL MAILING ADDRESS _____ *PROFESSIONAL LICENSE NUMBER (IF APPLICABLE) _____

CITY _____ STATE _____ ZIP _____ *M F *RACE _____

HOME PHONE _____ WORK PHONE _____ *BIRTH DATE ____ / ____ / ____

***Required for state reporting**

**Please
Complete
CRN
Number,
Title,
Start Date
and Fees**

TERM/YEAR	CRN	COURSE TITLES	START DATE	FEES

Office Use Only: Participant Registered/Initials TOTAL FEES

LSCC IS AN EQUAL ACCESS/EQUAL OPPORTUNITY INSTITUTION

If paying by credit card, you may fax payment information to 352-435-5044 or mail (see above).

NAME _____ STUDENT ID (FOR OFFICE USE ONLY) _____

BILLING MAILING ADDRESS _____ STUDENT PHONE _____

CITY _____ STATE _____ ZIP _____ FAX NUMBER _____

VISA MASTERCARD DISCOVER AMERICAN EXPRESS AMOUNT _____

ACCOUNT NUMBER _____ EXP. DATE _____ AUTHORIZED SIGNATURE _____

Office Use Only: Receipt No. _____ **Receipt Date:** _____

Paid by: _____ **Cashier Initials:** _____