



ECONOMIC DEVELOPMENT SERVICES
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SHORT TERM REGISTRATION FORM

TODAY'S DATE _____

COURSE _____

CLASS DATE(S) _____

NAME _____

BIRTHDATE _____

MALE **FEMALE** **RACE** _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

COUNTY _____ **PHONE (H)** _____ **(W)** _____

US CITIZEN **YES** _____ **NO** _____

FEE \$ _____

Paid by cash _____ **Check #** _____ **Money Order** _____

Credit Card _____ **Exp Date** _____

Bill fee to:

Company name _____

Address _____

Email address _____