

# Juilliard | Evening Division

## Summer 2019 Registration Form

PLEASE PRINT

Name \_\_\_\_\_

Student ID \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Social Security # \_\_\_\_\_ Birthday \_\_\_\_\_

I have read and understood the Evening Division Student Handbook and agree to abide by all policies and procedures.

Course #	Course Title	Tuition
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Please write the correct Course Number, Title, and Tuition

Tax-deductible contribution: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_



Mail-in registration should be postmarked 10 days before your first class.

Please **MAIL** registration form to: The Juilliard School Evening Division, 60 Lincoln Center Plaza, New York, New York 10023 or **FAX** to: (646) 505-4110

### METHOD OF PAYMENT

Check/money order payable to The Juilliard School

MasterCard

Visa

American Express

Account # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_