

Casa Italiana Course Registration

Please neatly print the following information:

First name _____ Last name _____

Street address _____

City, State, ZIP _____

Daytime phone _____ Evening phone _____

E-mail address _____

How did you hear about Casa Italiana (choose one)?

- Former/current student
- Chicago Reader
- Walk-by
- Other _____

Course name, day, and time _____

Course start date _____

Today's date _____

Course fee (choose one and insert total):

- With materials/text \$_____
- Without materials/text \$_____

Please check method of payment:

- Cash, *in-person delivery only**. Date received: _____
- Personal check, in person or by mail. Date received: _____
- Credit card, in person or by mail. Date received: _____

(Please note that course fees incur a \$15.00 additional charge if paid by credit card.)

Credit card type (circle one): Visa MasterCard

Credit card number: _____

Expiration date: _____

Cardholder's name: _____

Billing address: _____

* Cash payments accepted at Casa Italiana, 5430 N. Broadway, Chicago