



# Spring 2009 Master Gardener Class Registration Form



**FORM & PAYMENT DUE JAN. 31, 2009!**

### PART I: STUDENT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### PART II: CLASS OPTIONS

*Please check your class preference:*

- Option 1: Feb. 10-March 7 (Tuesdays and Saturdays)       Option 2: April 27-May 8 (Mondays through Fridays)

### PART III: REGISTRATION FEE

*Please check your fee preference:*

- \$75 with 40-hour volunteer service commitment       \$250 without 40-hour volunteer service commitment

### PART IV: PAYMENT OPTIONS

*Please check your payment method:*

- Cash       Check enclosed and made payable to CES (check # \_\_\_\_\_)
- Purchase order number: \_\_\_\_\_       JV from account number: \_\_\_\_\_  
(university employees only)
- Credit card (circle your card):      MasterCard      Visa

Cardholder name: \_\_\_\_\_  
(name as it appears on card)

Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ V-code: \_\_\_\_\_ Amount to charge: \$ \_\_\_\_\_ Credit card billing zip code: \_\_\_\_\_

*The UAF Cooperative Extension Service will charge your card the amount indicated above. In the event this amount is incorrect, you will be contacted. CES will confirm your registration via e-mail receipt upon success of transaction. All credit card information is held in strict confidentiality, and an original receipt is available upon request. All questions and concerns should be directed to: UAF Cooperative Extension Service Business Office, P.O. Box 756180, Fairbanks, AK 99775-6180, or call 907-474-7269.*

### PART V: PLEASE READ MEDIA RELEASE STATEMENT

*I give the University of Alaska Fairbanks (UAF) permission to photograph, videotape or record me and to use the photographs, videotapes, film or audio recording in print and electronic publications, video broadcasts, radio broadcasts or any similar electronic and mechanical means. I agree that the photographs, including negatives, slides and prints or any other presentation of the images, are the property of UAF. I waive any right I may have to inspect and/or approve the finished product in which the images may be used. By signing this form, I intend to release and discharge UAF from any and all claims that I may have and agree to hold harmless and defend UAF from liability arising from claims or litigation arising from its use of my image or voice.*

### PART VI: YOUR SIGNATURE

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PART VII: SEND IN YOUR REGISTRATION & FEE PAYMENT

Mail your completed registration form and payment to: UAF Cooperative Extension Service-Tanana District, P.O. Box 758155, Fairbanks, AK 99775-8155, Attn.: Master Gardener Class; fax to 907-474-6885; or e-mail to [ffmah@uaf.edu](mailto:ffmah@uaf.edu). All registration fees will be refunded for reservations cancelled up to the start of the class.

### "I CANNOT ATTEND THE SPRING 2009 MASTER GARDENER CLASS!"

- Please keep me on your mailing list for a future class. My current contact information is provided under "Student Information." (Mailing list updates are due by Jan. 31, 2009, at which time names and addresses will be removed.)