

# General Information

## Confirmation

Each participant will receive a written confirmation of his/her registration, which will give the date, time and location of event.

## To Bill Your Company

If you want your company to be billed, please complete the registration form and be sure to include company name, address and authorization signature.

## Parking

Ample free parking is available at the Shah Center.

## Smoking

McHenry County College's Shah Center is a smoke-free environment. Due to this policy, no smoking will be allowed in the building or seminar rooms.

## Emergencies

If your office or family needs to reach you during the seminar, please have them call (815) 455-8593 or (815) 479-7536. A staff member will assist them.

## Attire

Casual dress is the attire selected by the majority of our participants.

## Walk-in Registration

Walk-in registration will be accepted as space allows.

## Inclement Weather

If inclement weather occurs, please listen to a major radio station to see if college operations have been affected. Or call (815) 455-3700 to hear a recorded message if the college is closed.

## Cancellation/Substitution Policy

If an offering is cancelled by McHenry County College, registrants will be notified by phone at their place of employment or at home. Full refund of tuition will be made when McHenry County College cancels. A course registration cancelled 24 hours in advance by the registrant is subject to a full refund or the tuition can be applied to enrollment in another class. Failure by a participant to cancel a class registration 24 hours in advance of the date of the offering will necessitate full payment of tuition and fees. Someone may substitute for you at any time.

## Guarantee

If you are not satisfied with any Shah Center seminar, you will receive a tuition credit on any future seminar.

## Accuracy Policy

McHenry County College has made every reasonable effort to determine that

everything stated in this schedule is accurate. Courses, programs, seminars, and workshops offered, together with other matters contained herein, are subject to change without notice by the administration of the college for reasons related to student enrollment, level of financial support, or for any other reason at the discretion of the college. The Shah Center further reserves the right to add, amend, and repeal any of their rules, regulations, policies, and procedures without incurring obligation.

## Please Note

There is NO senior citizen discount available for any seminars, workshops or classes with the NTCs, NTLs, NTTs, NTES, NTGS, NBDS prefix in the course number.

# 3 Ways to Register



## Call

(815) 455-8588 and charge your registration to VISA, MasterCard or Discover.



## Fax

the completed information form with your credit card information to (815) 578-9682.



## Mail

the completed registration form (may be copied) with your check, money order or credit card information to:

McHenry County College  
Shah Center  
4100 W. Shamrock Lane  
McHenry, IL 60050

## Registration Form – Sign Up Now!

# SHAH CENTER

Date of Birth (mm/dd/yy)

□	□	/	□	□	/	□	□
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First Name \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Course ID No.	Course Title	Date

Payment due with registration unless company-sponsored course. If company-sponsored, please include company name and an authorized signature.

VISA <input type="checkbox"/>	VISA/MasterCard/Discover Card Number	<table border="1"> <tr><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td><td>□</td></tr> </table>	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	Expiration Date (mm/yy)
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MasterCard <input type="checkbox"/>			□	□	/	□	□																
Discover <input type="checkbox"/>																							

Cardholder Signature (required) \_\_\_\_\_

### For company-sponsored course, complete the following:

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Company Phone \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature and Title

Approver email \_\_\_\_\_