## **Registration Form**

Course Title:	A	America's Boating Course						
First Name:			MI:	Last Nam	e:			
Nickname:			Nickname Preferred:		certificate i member wi	nbers or former memb number below. If you a th a USPS University us class, enter that nu	are a non- number issued	
Address:								
City:				County:				
State:	Zip:							
Cell Phone:				Home Phone:				
E-mail:						Opt-out o		
Gender*:	M DF	Date of Birth (mm/dd/yyyy)*	/	/		Under 18***:	No Yes	
Hair Color*:		Eye Color*:		Height*:	ft	in		
* The above information is required for class credit and also for state boating certification. Please be sure it is correct.  ** "Opt-out" A "Check" will be entered by the program for students who are under 18 years of age. Those 18 years or older wishing no contact may also enter a "Check" to opt out.  *** "Under 18" Check No or Yes. (Parent or guardian approval required to take this course if under 18.)								
Boat Type:	None [	Outboard	I/O 🔲 Inb	ooard 🔲 🤄	Sail 🔲 PW	/C Padd	le	
Boat Length:	Less than16'	16-25' 🔲 26-	39' 40-	54' 📗 55	<b>'</b> +			
Trailer:	er:							
Learned of Course:								
Description*: Online PIN		St	udent					
Number**:			gnature:				Date	
<ul> <li>* "Description" Please give additional information about how you learned about this class, such as, the name of the News/Magazine,TV program or something other than one of the listed sources.</li> <li>** "Online PIN" If you are an ABC online student needing a proctored exam, enter the number you received from USPS</li> </ul>								
online.								
Parent/Guardian approval signature for minor-age student:								
Printed Name	of Parent/Guardi	an:					Date	

ED46a (16 Oct. 2019)