

**SCAN Resource & Education Center
Winter 2019 Course Registration Form**

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ E-MAIL: _____

*My SCAN Membership is current YES NO *LAST Call - 2 for 1 Membership & Renewal Special**

NEW POLICY: You must register for a class or workshop at least one week prior to the start date.

IMPORTANT:

- All non-members must pay the non-member tuition rate listed with each course.
- All course withdrawals must be submitted in writing and approved by the Program Coordinator.
- All fitness classes require SCAN's health form to be completed.
- Please report to your class as it is scheduled in the class listing. You will be notified if class is cancelled or changed.

REGISTRATION WILL NOT BE PROCESSED WITHOUT PAYMENT

CODE #	TITLE	DAY	TIME	TUITION
	Please CIRCLE date to RSVP for events listed			
February 1	Dealing With Dementia - YMCA Community Center, Freehold, 11:30AM-2:30PM - RSVP			FREE
February 26	Lunch & Learn - Monmouth Mall, 12:00PM-1:30PM - RSVP			FREE
March 13	Home Sweet Home: How to Age In Place Fair - Monmouth Mall, 10:00AM-1:00PM - RSVP			FREE
March 21	Lunch & Learn - St. Andrew United Methodist Church, Toms River, 10:30AM-1:00PM - RSVP			FREE
April 3	Transportation Fair - St. Andrew United Methodist Church, Toms River, 10:30AM-1:00PM - RSVP			FREE
April 10	SCAN Open House & Brunch - Monmouth Mall, 10:30AM-12:30PM - RSVP			FREE

TOTAL TUITION \$

Your support is KEY. Please support SCAN as we celebrate 30 years helping our community stay healthy, stay active and stay connected. Your donation ensures we continue to be a valuable community asset providing significant benefits to you and others. We appreciate YOU!

_____ \$5
 _____ \$10
 _____ \$25
 _____ \$30
 _____ \$

TOTAL DUE \$

Mail completed registration form and check made payable to SCAN:
 Monmouth Mall, 180 Highway 35 South, Eatontown, NJ 07724 ~ Tel: 732.542.1326 ~ www.scannj.org

VISA MasterCard Card # _____ Exp Date: _____ Security # _____

Billing address on Card _____

SIGNATURE: _____ DATE: _____