



Course Enrollment Form

Name: _____

Course Selection (Please check and provide dates of enrollment)

_____ AGNG 630 [Business and Strategy] Date _____

_____ AGNG 633 [Management and Operations] Date _____

_____ AGNG 634 [Sales and Marketing] Date _____

_____ AGNG 636 [Property Development] Date _____

Employer Information (Optional)

Employer's Name _____

Position Title _____

Employer's Address _____

City _____ State _____ Zip Code _____

Number of years you have worked in seniors' housing _____

Credit Card Payment: All items below are required

Name (EXACTLY as printed on the card) _____

Name of the credit card (MasterCard or VISA) _____

Account number (16 digits) _____

Card expiration date (mo/yr) _____ - 20 _____

Purpose of charge: GRADUATE SCHOOL APPLICATION FEE

Amount authorized to charge to your account: \$50 fee

Cardholder's signature _____

Fax this information to Director of Admissions, 443 543-5639.