

Registration for Planning and Zoning Administration Courses

Mail to:
Planning/Zoning Admin. Program
Center for Government Services
Rutgers, The State University of NJ
33 Livingston Ave., Suite 200
New Brunswick, NJ 08901-1979

I wish to register for _____

_____	_____	_____
Course Title	Course #	Location
_____	_____	_____
Course Title	Course #	Location
_____	_____	_____
Course Title	Course #	Location

Total amount due: \$ _____. CHECK or VOUCHER (payable to Rutgers University) OR CREDIT CARD INFORMATION MUST ACCOMPANY REGISTRATION.

Check Voucher VISA Mastercard Credit Card No. _____ Exp. Date _____

Name _____ Signature _____

Home Address _____

Home Phone _____ Business Phone _____

Social Security Number _____ Yes, I am..... No, I am not.....interested in the certificate program.
(necessary for computer registration)

Municipal Affiliation _____ Title _____