



Request to Add a Course Winter 2010

Last Day to Add is January 10, 2010

Student Information

Last name: _____ MI: _____

First name: _____

Telephone: _____

Email: _____

Student ID:

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Winter 2010 Jan. 04 – Feb. 07	
Section	Class
<input type="checkbox"/> 7046	Economics 1
<input type="checkbox"/> 7047	English 101
<input type="checkbox"/> 7048	English 102
<input type="checkbox"/> 7049	Health 11
<input type="checkbox"/> 7050	History 11
<input type="checkbox"/> 7051	Philosophy 1
<input type="checkbox"/> 7052	Political Science 1
<input type="checkbox"/> 7053	Psychology 1
<input type="checkbox"/> 7054	Psychology 41
<input type="checkbox"/> 7055	Sociology 1

To Enroll:
 Complete this form, including signature and FAX to (818) 833-3598

Classes are offered at L.A. City, Southwest, Valley and Pierce Colleges. You may attend any of these locations. For class times and locations go to www.lamission.edu/itv and view Schedule of Classes.

SIGNATURE _____ DATE _____

CREDIT CARD PAYMENTS AMEX Discover MasterCard Visa
 I AUTHORIZE ITV TO CHARGE MY CREDIT CARD.
 Credit Card no. _____ Expiration Date: _____ Amount: \$ _____

For Check Payments:
 Make Check Payable to ITV and mail this form and check to ITV 13356 Eldridge Avenue, Sylmar, CA 91342

CHECK PAYMENTS DISCLAIMER
 When you provide a check as payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. Funds may be withdrawn from your account as soon as the same day and you will not receive the check back from your financial institution. If your payment is returned due to insufficient funds, you authorize us to make a one-time electronic fund transfer from your account to collect a fee as allowed by state law or ITV may assess \$10.00 returned check fee and place a hold on your academic record until the returned fee and the amount of the returned check are paid.

I REJECT PROCESSING MY CHECK ELECTRONICALLY, DEPOSIT MY CHECK USING THE TRADITIONAL PAPER PROCESS.

OFFICE USE ONLY
Date received: _____ Processed: _____ By: _____