



Course Registration Form

Mail this form to:
Program Coordinator, Fox College of Business,
Suite #11-334, 4040 Creditview Road,
Mississauga, Ontario, L5C 3Y8

INSTRUCTIONS FOR STUDENTS:

1. Complete and sign this form.
2. Make a photo copy of your Secondary School Diploma or equivalent (if this is the pre-requisite).
3. Buy a bank draft or certified cheque for the payment (payable to Fox College of Business)
4. Mail this form with the copy of your diploma (if applicable) and payment to the address above.

Program Title: _____

Program Fee: \$ _____ plus 13% HST if applicable

Total Fee: \$ _____

Your Name: _____
(This will be printed on your certificate)

Home Address: _____

Home Telephone No.: _____

Email Address: _____

Company Name: _____

Company Address: _____

Signature: _____