

Career Skills Registration Form

To register, please complete the registration form below and submit it one of the following ways:

1. MAIL TO

SMCC Registration Office
2 Fort Road, South Portland, ME 04106

2. EMAIL TO:

registration@smccME.edu

Last Name: _____ First Name: _____ Middle: _____

E-Mail: _____

Cell Phone: _____ Home Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Social Security #: _____ Gender: Male Female Birthdate: _____
(Required)

Course Title Course Code

Payment Information

Payment in full is due upon registration. Payments can be made by cash, check, money order, VISA, MasterCard, or Discover.

Check: Amount \$ _____

Credit Card: MC Visa Discover Number: _____

3-Digit Security Code On Back Of Card: _____ Exp.: _____

HAVE A QUESTION? Call us at 207-741-5800 or registration@smccME.edu