



THE  
**COLLEGE**  
OF THE  
**FLORIDA KEYS**

## CFK COMMUNITY EDUCATION & WORKFORCE COURSE REGISTRATION FORM

Office of Enrollment Services  
The College of the Florida Keys  
5901 College Rd.  
Key West, FL 33040  
Email: [admissions@cfk.edu](mailto:admissions@cfk.edu)

Registration after the first week of class may require written permission from the instructor. Full payment is due immediately.

Name:				Student ID Number:													
Last				First				Middle									
A (Add) D (Drop)	Course Prefix	Course #	CRN	Title				Days		Time							

By registering for courses, I understand and agree that I am registering for courses and am responsible for the payment of all tuition and fees by the established due dates on academic calendar, unless I drop the courses during the refund period. If my account becomes delinquent, I will be responsible for paying the College all past due amounts/service charges and any associated collection agency fees up to a maximum of 30% of the account balance, reasonable attorneys' fees, cost and expenses incurred by the College in its collection efforts. I agree to give CFK and its agent's permission to contact me on my home or mobile phone, email address, and mailing address. By signing below, I am entering into a legal and binding contract with The College of the Florida Keys and I hereby acknowledge that I have read and understand the Terms and Conditions of this registration agreement and Student Financial Responsibilities policy located in Student Catalog.

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Instructor's Signature (if applicable)**

\_\_\_\_\_  
**Date**

**COMMENTS FOR OFFICE USE ONLY:**