

Please fill out the registration form and submit via:

- 1) Email to [kchoi@jhu.edu](mailto:kchoi@jhu.edu)
- 2) Fax to 410-614-4986
- 3) Mail to ATTN: Keith Choi, Johns Hopkins Education and Research Center, 615 North Wolfe Street, Room W7517, Baltimore, MD 21205

**Mary Doyle**

Director  
410-955-0423 office  
[mdoyle6@jhu.edu](mailto:mdoyle6@jhu.edu)

**Keith Choi**

Program Coordinator  
410-955-4088 office  
[kchoi@jhu.edu](mailto:kchoi@jhu.edu)

Course Title

Course Number  Start Date  Tuition

Name  Credentials

Special Needs (dietary, access, etc)

Home Address

City  State  Zip Code

Home Number  Email

Do you work for:

- Private Industry    Federal Govt    State Govt    Local Govt    Academic   Other

Company  Occupation  Title

Address  Fax Number

City  State  Zip Code  Work Number

Method of payment (please check one):

- Credit Card (please complete info below)    JHU Tuition Remission    Check (payable to Johns Hopkins University)
- American Express    Discover    Enclosed    In the mail/to follow
- MasterCard    Visa

Credit Card Information:

Card Number  Expiration Date  3 or 4 Digit Verification

Print Cardholder's Name

3 digit code is printed on signature strip on back of the card or 4 digit code is on the front of AMEX card.

Cardholder's Signature

Where did you learn about this course?