

**EXTENSION REGISTRATION FORM**



Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
City State/Province Zip/Postal Code

E-mail Address \_\_\_\_\_

Social Security # \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Birth Date \_\_\_\_\_ Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Maiden Name \_\_\_\_\_

Have you ever taken a workshop from Augustana University?  
Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

Select one 3-credit option: PSYC 620RY (Graduate level) \_\_\_\_\_ SPED 620RY (Graduate level) \_\_\_\_\_

Course Name: **CRISIS INTERVENTION WITH YOUTH (LSCI)**

Beginning Date: \_\_\_\_\_ Location of Course: \_\_\_\_\_  
City State/Province

Ending Date: \_\_\_\_\_ Name of Trainer: \_\_\_\_\_

Student Signature: \_\_\_\_\_

**METHOD OF PAYMENT/CREDIT CARD AUTHORIZATION (PAYMENT TO RECLAIMING YOUTH AT RISK)**

\_\_\_ US Dollar Check \_\_\_ US Dollar Money Order \_\_\_ Credit Card

Name \_\_\_\_\_

Billing address \_\_\_\_\_  
Street/ P.O. Box

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Telephone \_( \_\_\_\_\_ ) \_\_\_\_\_ (work) ( \_\_\_\_\_ ) \_\_\_\_\_ (cell)

Type of Credit Card: \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Discover \_\_\_ American Express

Account# \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV (3 or 4 digit) \_\_\_\_\_

I authorize **Reclaiming Youth at Risk** to process payment for \$300 US Dollars to the credit card listed above. I understand that this payment is non-refundable once the registration form is submitted to the university.

Signature \_\_\_\_\_

Note: Checks or money orders must be \$300 USD and made payable to "Reclaiming Youth at Risk." Your credit card will be processed by Reclaiming Youth at Risk in U.S. funds according to your designation on the registration form, \$300 USD for 3-credits.