Kankakee Community College Assessment Fair Registration Form

OFFICE OF CONTINUING EDUCATION AND CAREER SERVICES
100 College Drive • Kankakee, IL 60901-6505 • 815-802-8200 • FAX: 815-802-8201

Today's date://			
PLEASE PRINT.			
Name: LAST	FIRST		MIDDLE (FULL)
Street address: U Home U Busines	SS		
City:	State: ZIP code:	County:	
Please mail a receipt. Unless this	s box is checked, a receipt will not be mailed.		
Home phone:	Work/alternate phone: _		Birth date://
Company name:			
E-mail address:			
	23rd Annual Community College Assessment Fair	Feb. 15, 20	TOTAL FEES: \$
Student's cianature:		Date:	
☐ Please bill my company. A purch		_	Checker's Initials: E U
Card no.:			Expiration date:
			Security code:
			Three-digit code on back of card.
In case of emergency, contact:		Phone:	