

Golden Hyde School
1168 San Gabriel Blvd. #J, Rosemead, CA 91770
TEL: 626-571-0751 FAX: 626-571-0873

ENROLLMENT FORM

STUDENT INFORMATION

<small>(FIRST)</small> NAME	<small>(MIDDLE)</small>	<small>(LAST)</small>	AKA
ADDRESS			
CITY	STATE	ZIP CODE	
HOME PHONE	BUSINESS PHONE		
COMPANY NAME			
DRIVER'S LIC NO	SSN#		
BIRTHDATE	EMAIL		
HOW DID YOU HEAR ABOUT US? <input type="checkbox"/> FRIEND (NAME): _____			
<input type="checkbox"/> NEWSPAPER <input type="checkbox"/> YELLOW PAGES <input type="checkbox"/> INTERNET <input type="checkbox"/> OTHER: _____			

COURSE DESCRIPTION - SCHOOL USE ONLY

52 - HOUR PRELICENSING	REGISTRATION DATE	COMPLETION DATE	FINAL EXAM	CERTIFICATE DATE
LIFE & HEALTH				
LIFE ONLY				
FIRE & CASUALTY				
OTHER				

PAYMENT RECORD - SCHOOL USE ONLY

AMOUNT PAID	DATE	PAYMENT METHOD
REGISTRATION		CK # _____
TEXTBOOK		MC/VISA _____
TOTAL		PAID IN FULL <input type="checkbox"/>

ADD'L PURCHASE(S)	AMOUNT PAID	DATE	PAYMENT METHOD
HOT QUESTIONS			CK # _____
TEXTBOOK			MC/VISA _____
OTHER:			PAID IN FULL <input type="checkbox"/>

SCHOOL COMMENTS

RECEIVED ON:
