



**EMPLOYMENT TRAINING FOR ADULTS**  
*What's Your ETA?*

F. Donald Myers Education Center  
 Henning Road  
 Saratoga Springs, NY 12866  
<http://wswheboces.org>

voice: 518/581-3555 or 518/746-3555  
 email: kbrough@wswheboces.org

**Employment Training for Adults  
 REGISTRATION FORM**

Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

School District \_\_\_\_\_ Email Address \_\_\_\_\_

Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

County One-Stop \_\_\_\_\_

Course Name	Evening/Day	Tuition	Fee/s	TOTAL Due

Mail-in Charge Form – **PLEASE PRINT**

Check or Credit Card Used            Master Card \_\_\_\_\_            Visa \_\_\_\_\_            Discover \_\_\_\_\_

If you wish to pay your tuition and fees by mail or fax please provide the information below:

Card Number \_\_\_\_\_            Expiration Date \_\_\_\_\_            CW (3 digits on back of card) \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone Number \_\_\_\_\_            Cell Number \_\_\_\_\_

Total Charges \_\_\_\_\_

**Cardholder Signature** \_\_\_\_\_

**SEND TO:**

**WSWHE BOCES  
 Employment Training for Adults  
 F. Donald Myers Education Center  
 15 Henning Road  
 Saratoga Springs, NY 12866**