

**FINANCIAL EDUCATION CENTER
REGISTRATION FORM**

Thank you for your interest in the courses offered by the Financial Education Center. Please complete the following to register:

PERSONAL INFORMATION

Name: _____

Social Security Number: _____

(Recordkeeping purposes)

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Employer: _____

REGISTRATION INFORMATION

Will this be your first FEC class? _____

	<u>Course Title</u>	<u>Location</u>	<u>Start Date</u>	<u>Tuition</u>	<u>Books</u>	<u>Total</u>
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
				Total:		_____

Please make checks payable to: **Financial Education Center**
 Attn: Herb Sousa, Jr.
 91-2036 Kaioli Street
 Ewa Beach, HI 96706

I hereby certify the accuracy of the above information and grant FEC permission to provide my course grades to the American Institute of Banking or any college or university where I have registered for future education. I understand that this tuition is nonrefundable.

Signature: _____ Date: _____

(The Financial Education Center does not discriminate on the basis of race, color, sex, age, disability, and national or ethnic origin.)
 (For additional information, contact June DeBusk at Hawaii National Bank, 528-7794 or www.June.DeBusk@HNBhawaii.com.)