



**UNION COUNTY VOCATIONAL – TECHNICAL SCHOOLS  
CONTINUING EDUCATION DIVISION  
1776 Raritan Road, Scotch Plains, NJ 07076**

Phone: 908-889-8288 ext. 304 Fax: 908-889-4940



**Winter 2019-APPLICATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**APPRENTICE: \_\_\_ YES \_\_\_ NO If you are an apprentice complete the following section:**

Sponsor: \_\_\_\_\_ Address: \_\_\_\_\_

County: \_\_\_\_\_ Business phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email Address: \_\_\_\_\_

COURSE TITLE	MEETING NIGHT	CLASS TIME	TUITION
PAYMENT EXPECTED AT REGISTRATION NO EXCEPTIONS!		Registration Fee	\$ 10.00
		Late fee	\$ 20.00
		Total Tuition	\$

**\*CLASSES WITH LOW ENROLLMENT WILL BE CANCELLED WITHIN 24 HOURS OF THE START DATE\***

You may be required to use various tools and equipment. Appropriate instruction in the proper use of tools and equipment is given and close supervision is maintained. Every precaution is taken to prevent accidents. We ask your cooperation in impressing upon you the importance of being careful. It is mandatory that all students accept the obligation to obey the safety rules designed to protect them and others.

**RELEASE INFORMATION:** I am fully aware that the Union County Vocational - Technical School is a training institution, and the operators are not skilled or fully trained to provide professional services. It is agreed and understood that I will not hold above named school, or its administrators, instructors, or student operators liable or accountable for any injury, damage or loss of personal property that may occur as a result of work services performed. I understand that all work in the Vocational - Technical Schools is performed by students under supervision. The Vocational Schools will not be responsible for repeat services, repairs or guarantees of the product efficiency.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

(if over 18 years old)

**Method of Payment:**

Check \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_ Visa \_\_\_\_\_ Master Card \_\_\_\_\_ Discover \_\_\_\_\_

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**Security Code:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ / \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_