Nashua Adult & Community School

NHS South: 36 Riverside St., Rm A2003, Nashua, NH 03062 NHS North: 8 Titan Way, Rm A106, Nashua, NH 03063 Tel: 603-966-2420 Fax: 603-966-2441

TODAYS DATE: _____

Registration Form for Adult Enrichment Courses

Please answer all questions and print clearly:

Last Name	First Name	
Address	City/State/Zip	
Phone(s)		
	Please check the schedule for class times and locations	
Course Name	Teacher	_
Day of the Week		
Tuition Lab Fe	ee	

Policies and Procedures

All policies are in accordance with the Nashua School District. No smoking will be allowed at Nashua High School (within the building or on the grounds) in accordance with state law. Violations will result in suspension from class. Any behavior that impedes the operation of the Nashua Adult & Community School or negatively impacts a class will result in a student's removal from the course. Please demonstrate respect for our teachers and this program.

Payment and Refunds

Students can submit a check or money order made payable to the Nashua School District. Payment is required on or before the first day of class. There will be a \$25 processing fee charged for any returned checks.

Course Materials and School Property

Student agrees to pay any repair/replacement costs if any piece of equipment is broken and/or if the facility itself is damaged.

School Calendar

The Nashua Adult & Community School follows the Nashua School District calendar. When Nashua Public Schools are closed due to inclement weather, holidays or school vacation days, Enrichment courses will not be held.

Right to Cancel

The Nashua Adult & Community School retains the right to cancel or reschedule classes and/or courses. Participants will be notified and fees will be prorated or refunded accordingly.

"I have read the above policies. I understand them completely and agree to comply with all aspects of them."

Signature

The Nashua Board of Education reaffirms its position of compliance with applicable State and Federal laws of nondiscrimination on the basis of race, color, national origin, religion, sex, sexual orientation, disability, and/or age in admission to, access to, treatment in, or employment in the services, programs, and activities of the Nashua School District.

For Office Use Only: Amount Paid _____ Check# or Cash _____ Date _____