

# The Heritage Institute

Register by Mail or Online  
<https://www.ho.edu>

Mail Reg. Form to:  
**The Heritage Institute**  
P.O. Box 1273, Freeland, WA 98249  
Phone: 360/341-3020 Fax 360/341-3070

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Permanent Mailing Address: City/State/Zip \_\_\_\_\_

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_ SS# \_\_\_\_\_

School District Name \_\_\_\_\_

Grade Level (Circle One): Pre-K K-3 4-5 6-8 9-12

Position (Circle One): Teacher Admin Student Faculty Librarian Counselor/Psychologist \_\_\_\_\_

Type of Organization: (Circle One) Public School Private School College/University Daycare Other

Credential (circle one): Bachelors Masters Ph.D. Other \_\_\_\_\_

Subject Taught \_\_\_\_\_

COURSE CREDITS REQUESTED CHECK ONE BELOW:

400 Level  500 Level  WA Clock Hrs  OR PDUs  CEUs  PA ACT 48 Hrs

Pennsylvania teachers MUST enter PPID # \_\_\_\_\_

I request registration in the courses indicated below:

TUITION

COURSE NUMBER	QUARTER CREDITS	TUITION
COURSE NAME		
COURSE NUMBER	QUARTER CREDITS	
COURSE NAME		
COURSE NUMBER	QUARTER CREDITS	
COURSE NAME		
COURSE NUMBER	QUARTER CREDITS	
COURSE NAME		
COURSE NUMBER	QUARTER CREDITS	
COURSE NAME		

For what purpose will you use your continuing education credits?

TOTAL TUITION \$

Recertification  Salary Advancement  Professional Development  Other \_\_\_\_\_

When will you next renew your license/certification? \_\_\_\_\_ Month \_\_\_\_\_ Year

GROUP COLLABORATION:

- I am enrolling in a group.
- I have read and understand the group collaboration guidelines located on THI's website.
- List group members (maximum of 4)

Payment is due in full by check, credit card, P.O. or M.O. Check one:

CHECK # \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

P.O.# \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

M.O.# \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

VISA  MASTERCARD  AMEX.  DISCOVER

Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_ 3-4 Digit Code: \_\_\_\_\_

Materials fees to be paid directly to the instructor. Do not include with tuition.

NOTE: Additional postage charged will apply to international mailings.

**AGREEMENT: I have read and agree to the Policies and Credits statement of The Heritage Institute catalog and website.**

Signature \_\_\_\_\_ Date \_\_\_\_\_