Auburn University Office of Professional and Continuing Education (OPCE)
Registration Form – Test Prep Courses
Use this form to register for Auburn University OPCE Test Prep by phone, mail, or fax.

GENERAL INFORMATION

Name

Mailing Address

City _______ State _______ Zip _______

Home Phone _______ Work Phone _______ Email _______

TEST PREP COURSE INFORMATION

Course Title ____________________________ Course Code ____________________

Course Title ____________________________ Course Code ____________________

PAYMENT INFORMATION

☐ Enclosed is my check for money order, payable to Auburn University.
☐ Please charge to the following credit account: ☐ VISA ☐ MasterCard ☐ Discover ☐ American Express

Card Number ____________________________ Verification Code ____________
Expiration Date _____ Cardholder’s Name________________ Amount Billed _______
Signature ____________________________

TO REGISTER

• By Phone – Call (334) 844-5100, provide registration and payment information
• By Mail- Print registration form, complete and mail to Auburn University Test Prep  OPCE  301 O.D. Smith Hall  Auburn, AL 36849
• By FAX – Print registration form, complete, FAX to (334) 844-3101
• Online – Those paying full registration fee and using Visa, MasterCard, Discover or American Express for payment may access a secure gateway for credit card payments by registering online at www.auburn.edu/opce

RELEASE

I acknowledge that while all possible precautions for safety are taken, Auburn University or the instructor cannot be held responsible for injury while participating in a course.

Signature ____________________________ Date ____________________________

CANCELLATION & REFUND POLICY

If you are unable to attend a course for which you have registered, we ask that you notify the Office of Professional & Continuing Education (fax, or in writing/email) no later than three business days prior to the beginning of the course. A full refund minus a $20 administrative charge, is given when cancellation is made three business days prior to the first scheduled session; no refund thereafter.

FOR OFFICE USE ONLY

Amount________________ Receipt#________________ Date________________