

REGISTRATION FORM

For Classes held in Longwood, Wekiva, Port Orange, Kissimmee, Champions Gate, & DeLand

NAME (print) _____

ADDRESS _____

CITY & ZIP CODE _____

CONTACT PHONE NUMBER _____

SOCIAL SECURITY NUMBER _____

(Please note: this info is needed for state reporting! Please provide.)

E-MAIL ADDRESS _____

CIRCLE THE SCHOOL LOCATION YOU WILL BE ATTENDING:

Watson Longwood
1445 West SR 434
Longwood, FL 32750

Watson Wekiva
317 Wekiva Springs Road
Longwood, FL. 32779

Watson DeLand
1961 S Woodland
DeLand, FL 32724

Watson Kissimmee
1950 E. Irlo Bronson Mem. Hwy
Kissimmee, FL. 34744

Watson Port Orange
808 Dunlawton Ave
Port Orange, FL. 32127

Watson Davenport
8235 Champions Gate Blvd
Davenport, FL 33896

*I understand that the tuition fee is \$99.00 for the class + \$70.00 for the course text, material, supplies, and class exam. All students MUST have the current text. To assure a reservation in this course, I have enclosed a ***non-refundable** pre-registration fee of \$75.00 **which will be applied toward the total cost of \$169.00**, or I am enclosing payment in full.*

The payment accompanying this registration is to the Watson School of Real Estate for \$_____ with payment being made by () Check () Money Order () Cash. If paying only the \$75.00 pre-registration fee, I agree to pay the remaining fees on the first day of class. Mail registration to:

Watson School of Real Estate
1445 W. SR 434 Suite 200
Longwood, FL. 32750
Direct 407-772-3696

I understand that if I fail the class exam, I may take the re-take test after 30 days from the original test date and a fee may be charged .Please Sign and Date.

Student Signature

Date

Registrar Signature

Date

** These fees are refundable if the class is cancelled due to unforeseen circumstances.*

OFFICE USE ONLY

AMT. PAID

DATE

BAL.

FORM OF PMT.

INSTRUCTOR

FIRST CLASS

TEXT REC. Y N

FINAL EXAM SCORE