

**2012-2013 Certificate  
Program**

**User-Centered  
Design**

**UW - Seattle campus**

Summer 2013

Fifth Term: 06/24/2013 - 08/23/2013

**REGISTRATION FORM**

**University of Washington**

**Professional & Continuing Education**

UW Professional & Continuing Education Registration Services, PO Box 45010  
Seattle WA 98145-0010 Fax (206) 685-9359, Phone (206) 543-2310

**IMPORTANT - PLEASE READ - THIS IS NOT A BILL  
KEEP A COPY OF THIS FORM FOR YOUR RECORDS**

\* Registration is not final without payment.

\* Return this form and payment to the above address or register by telephone using VISA or MasterCard by calling (206) 543-2310 Monday through Thursday 8:00 a.m. to 5:00 p.m. and Friday 9:00 a.m. to 5:00 p.m.

**PERSONAL INFORMATION**

Name (Last)	(First)	(Middle)	Birthdate	
Address	City	State	Zip Code	UW Student ID No. (Required if you have ever enrolled at UW)
Day Phone	Evening Phone	E-mail		
Signature (I acknowledge I have read and understand all fee/policy information below.)				Date
Please check: Yes <input type="checkbox"/> No <input type="checkbox"/> I am active U.S. military or a U.S. military veteran. <input type="checkbox"/> I will seek reimbursement from the GI Benefits Office.				

**COURSE(S)**

- ☐ **Registration #125327 User-Centered Web Design (HCDE 537 A)**  
Class: 06/24/2013 through 08/23/2013 W 5:50pm-9:30pm  
Lab: Tu 6:00pm-8:00pm or Sa 10:00am-12:00pm (choose on first day of class)

Instructor: Suzanne Boyd

Academic Credits: 5.00

Tuition: \$3,375.00

Supplemental Item: Lab Fee: \$50.00 (required)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$42.00

**Registration Fee:**

**Total:**

\$ \_\_\_\_\_

**METHOD OF PAYMENT**

Please check the box that indicates your payment method:

☐ VISA ☐ MasterCard

☐ Credit Card. (Provide card information at right.)

☐ Enclosed check made payable to the University of Washington.  
(Returned checks are subject to \$25 service charge.)

☐ Third-party payer - Separate document (purchase order or letter of authorization to bill) must accompany registration form each term.

☐ Third-party payer authorization on file.

☐ Approved or pending Financial Aid - UW Professional & Continuing Education Payment Agreement must accompany registration form each term.

Credit Card Number \_\_\_\_\_ Expiration date \_\_\_\_\_

Print name as it appears on card \_\_\_\_\_ Signature \_\_\_\_\_

Credit card billing address (if other than student address) \_\_\_\_\_

Phone number \_\_\_\_\_

**FEES / POLICIES**

**PAYMENT POLICY:** The payment deadline is two weeks before the first day of class. Accepted students who do not pay by the close of business the third day of class may be assessed a \$90 late fee.

**REFUND POLICY:** To receive a 100% refund, minus the \$42.00 nonrefundable registration fee, you must send a written request to withdraw by the day before the first day of class. Email your request to [uweoreg@pce.uw.edu](mailto:uweoreg@pce.uw.edu) or fax to (206) 685-9359. There is no refund for withdrawals on or after the first day of class.

**WITHDRAWAL POLICY:** If you are not planning to continue in the program or course, please send a request to withdraw, with or without a refund, to: UW Professional & Continuing Education Registration Services, PO Box 45010, Seattle WA 98145-0010, or send email to [uweoreg@pce.uw.edu](mailto:uweoreg@pce.uw.edu).

**OTHER MANDATORY FEES:** Information about other mandatory fees is available on the web at <http://f2.washington.edu/fm/sfs/tuition/components>.

**ACCOMMODATIONS FOR DISABILITIES:** To request disability accommodations, contact the UW Disability Services Office as early as possible at 206-543-6450.

**CANCELLATIONS AND CHANGES:** UW Professional & Continuing Education reserves the right to cancel programs or classes with low enrollment. Fees and tuition are subject to change.

**PARKING:** Parking information and maps are available on the web at <http://pce.uw.edu/resource.aspx?id=3846>.