



please **print** firmly

Student Number (UIN) _____

Last Name _____ First Name _____ MI _____

Street Address _____

City _____ State _____ Zip _____

E-mail Address _____ Personal Business

Home Phone _____ Business Phone _____

Program of Study _____

CAMPUS

Florissant Valley	Meramec		
Forest Park	Wildwood		

FEES

District residents \$83/credit hour
 Other Missouri residents \$123/credit hour
 Out-of-state residents \$158/credit hour
 International \$168/credit hour

FAX NUMBERS

Florissant Valley
 3400 Pershall Road • 314-513-4724

Meramec
 11333 Big Bend Road • 314-984-7051

Forest Park
 5600 Oakland Ave. • 314-644-9375

Wildwood
 2645 Generations Drive • 636-422-2020

Primary Course Selections (It is your responsibility to make sure prerequisites are met.)

Check One:
 General (1-18 hours)
 Regular (Financial Aid or Degree Seeking) 1-18 hours

Will you be receiving any financial aid?
 _____ Yes _____ No
 Federal financial aid recipients **MUST** go to Advising prior to registration.

OFFICE USE ONLY
 Data Entry Date _____ Staff Initials _____
 Payment Due Date _____

5-digit CRN	Course Number	Section	Audit	Hrs.	Title	Days	Time		Fees
Example: 12030	Example: HST:101	Example: 604	Yes/No	Example: 3	Example: AMERICAN HISTORY I	Example: MWF	Example: 3-3:50 p.m.		

*Sign here if you do **NOT** want to pay \$7 **MoPIRG** fee (Meramec classes only) _____

Alternate Course Selections									*MoPIRG	\$7.00

I have signed up for the Automatic Payment Plan. **Total Fees**

Payment options: **We no longer accept credit card payments by mail or fax.** Payment may be made in person at any of the Campus Cashier's offices by cash, check or money order. Mastercard, Visa or Discover cards may be used in person, online or by calling the Campus Cashier's office. Online payments may also be made by using a checking or savings account. Please call the Cashier's offices listed below with questions or for hours of operation.
Florissant Valley 314-513-4520, Forest Park 314-644-9738, Meramec 314-984-7736, Wildwood 636-422-2000

Signature _____ Date _____ Day Telephone Number _____