

Registration Form - Motorcycle RiderCourses (please print)

Please register me (please use the digit number to the left of the days on the registration form to indicate your choices.) See www.hvcc.edu/rider for complete schedule.

MSF Basic RiderCourse - LW 1st choice: _____ 2nd choice: _____ 3rd choice: _____

MSF Basic RiderCourse 2 - LW _____ MSF Introductory Motorcycle Experience _____

MSF 3-Wheel RiderCourse _____ MSF Ultimate Bike Bonding RiderCourse _____

MSF Advanced RiderCourse _____

Name _____
First Middle Last

Have you previously attended Hudson Valley? If yes, please state any other names your academic record may list: _____

NYS Driver's License # _____

Date of Birth: _____ SS# _____

Address: _____
Street City State Zip

Phone: _____ Email: _____

Payment amount enclosed: \$ _____

Method of payment: Check enclosed (made payable to Hudson Valley Community College)
MasterCard Visa Discover

Account # _____ Exp. Date: _____ 3-digit Security Code: _____

Cardholder's name: _____ Cardholder's signature: _____

PLEASE MAIL REGISTRATION FORM AND SUBMIT THE
CANCELLATION/REFUND POLICY ACKNOWLEDGEMENT TO:
Hudson Valley Community College,
Office of Community, Professional and Workforce Development
80 Vandenberg Avenue, Troy, NY 12180

(518) 629-7339 • Fax: (518) 629-8103