Registration Form

Anyone wishing to enroll for a Municipal Registrar course may register by mail or fax. Please use the attached application form. Those who apply by mail should submit the attached application with check, voucher, or credit card information no later than five days prior to the course date.

Upon receipt of your completed application and payment, we will notify you via email* that a class space has been reserved for you and will enclose directions to the classroom. Others will be notified and placed on a mailing list if the class is full. Walk-ins are not accepted.

The Center will refund the program fee less a $25 processing charge to any individual who provides written notice of withdrawal 48 hours prior to the start of the first class session. Withdrawal notices may be mailed or faxed. There is a $25 fee for returned checks. The University reserves the right to cancel any course or seminar if there are insufficient enrollments. In this event the refund will be 100% without a fee.

Preference will be given to Registrars and Deputy Registrars due to the recent mandate. Early registration is advisable due to limitations on class size. Questions can be directed to (732) 932-3640, ext. 648. The course fee is $372

7346A – Washington Boro (Warren County)
Fire Hall, Fridays, October 20, 27
and November 3

7347A – Rutgers University,
Center for Government Services,
Fridays, October 13, 20, and 27

7348A- Old Bridge, Municipal Complex,
Main Bldg, Fridays,
December 1, 8, 15

Mail to: Municipal Registrar Program
Center for Government Services
Rutgers, The State University of New Jersey
33 Livingston Avenue, Suite 200
New Brunswick, NJ 08901 - 1979

or

Fax to: (732) 932-3586

Name: _____ Social Security: _____

Home Address: _____

Home Phone: _____ Business Phone: _____

Township/Employer: _____ Position Held: _____
(must indicate municipal position)

Business Address: _____

Fax: _____ * Email: _____
*** must include email for notification**

Make check, voucher, or credit card information payable to Rutgers, The State University of New Jersey.

Amount Enclosed: _____

Method of payment (please circle): Check Voucher Visa MasterCard
Credit Card No: _____ Exp. Date: _____

Signature: _____