



Registration Form

First Name _____ Last Name _____ Sex (M/F) _____
Home Address _____ Postal Code _____
Mailing Address _____ Postal Code _____
Phone _____ Alternative Phone _____
Email Address _____
Course Name _____ Tuition Fees (\$) _____
Course Name _____ Tuition Fees (\$) _____
Highest Level of Education Completed _____
Current / Last Employer _____
The undersigned hereby undertakes and agrees to pay Ontario College of Technology the fees specified in this Registration Form. One of the following methods of payment can be use: <input type="checkbox"/> Pay by INTERAC e-Transfer to: admission@octech.ca <input type="checkbox"/> Pay cash or with a check in person <input type="checkbox"/> Pay by mailing a check to the college, payable to: Ontario College of Technology <input type="checkbox"/> Pay by bank-to-bank transfer from any of your local bank (See our bank information below) Name of the Account: Ontario College of Technology Account Number: 02632 - 010 - 1021117 Name of the Bank: Canadian Imperial Bank of Commerce Address of the Bank: 2904 Sheppard Ave. East, Toronto, Ontario M1T 3J4, Canada
Student Signature: _____ Date: _____