



Register by fax (215.717.6538), mail, phone (215.717.6006), in person or online (cs.uarts.edu/pie).



Last First Middle Initial

Street Address Apt#

City State Zip Country

Day Phone # Evening Phone # Cell Phone #

Email Address Male Female

Social Security # Date of Birth MM/DD/YYYY

Do you consider yourself to be Hispanic/Latino? Yes No

In addition, select one or more of the following racial categories to describe yourself: Black or African American American Indian or Alaska Native Asian Native Hawaiian or Pacific Islander White

School Name School District Subject(s) Grade

School Street Address City State Zip

Undergraduate College Attended Degree Graduation Year Subject

Graduate Program Attended Degree Graduation Year Subject

PA Professional Personal ID# (required for PA certified teachers)

I WISH TO REGISTER FOR THE FOLLOWING COURSES:

Table with 6 columns: Course #, Course Title, Location, Number of Credits, Tuition, Fees

Tuition and fee calculation box with fields for TUITION TOTAL, FEE TOTAL, TOTAL CHARGES, and Total Payment Enclosed.

How did you hear about the Professional Institute for Educators at the University of the Arts? with checkboxes for Current PIE Student, Recommended by a Colleague, UArts Website, Email Listserv, Advertisement, Other, Brochure Sent to Home, Brochure Sent to School, Internet Search.

PAYMENT: Visa MasterCard AmEx Check Money Order

Credit Card Number Name on the Card (please print)

Expiration Date Security Code Signature Date

Yes, this credit card billing address is the same as my home address.

No, the credit card billing address is: Street Address City State Zip

CONSENT: I hereby grant the University of the Arts the right to the use of or to reproduce, exhibit, display, broadcast and distribute photographic, videotaped or other images of myself and/or my artwork, as well as University-related works derived from said images, for use in connection with the activities of the University or for promoting, publicizing or explaining the University or its activities.

Signature Date