



Barry University Pharmacy Technician Workshop

Use this form to register

Mail or fax registration form to Barry University/School of Adult and Continuing Education, Attn: Desiree Carvalho or Rachel Caswick 11300 NE 2nd Ave Miami Shores, FL 33161/FAX: **305-899-3346**. For more information call 305-899-3300.

Name: _____ SS# or Barry ID# _____ D.O.B: _____

Mailing Address: _____

City/State/Zip: _____ E-Mail _____

Day phone: _____ Cell phone: _____

How did you hear about our program? _____

Current employer? _____

Course for which you would like to Register:

Pharmacy Technician Workshop - Location: _____ Date: _____

Fee: \$600.00 (includes course study materials)

INDICATE METHOD OF PAYMENT:

Check is enclosed (Payable to Barry University)

Charge to:

Visa Amex MasterCard

Credit Card Number: _____ Expiration Date: _____ Security Code: _____

Signature _____

Registration will be limited on a first-come first-served basis. An e-mail of confirmation will be sent one week prior to the start of the program. If you register late or do not receive a confirmation an e-mail by the end of the week before the start of the course, be certain to call (305) 899-3300 for important details.

CANCELLATIONS: a request to cancel must be made at least one week prior to the start of a program. Initial requests to cancel may be made by phone, but refunds may not be processed until a written request is received at least a week prior to the first day of the program. Barry University reserves the right to cancel any class because of insufficient registration.