

Massachusetts Casino Careers Training Institute Enrollment Form

· ·						
Last Name				First Name		
Street Address						
City				Sta	ate Zip Code	
				1 1		
Phone	Area Code Number			Month	Day Year	
Work/Day	1 1 1 1		Date of E	Birth *		
Home/Cell					ate entries of different people	
with the same name in the college database)						
E-mail Address						
1 1						
Person to contact in case of emergency Phone						
	_					
✓	Class	Circle One:		Starts On:	Cost	
	Blackjack-1	Morning, Afternoon or Ev	/ening	4/23 or 5/7	\$399	
	Roulette -1	Morning, Afternoon or Ev	/ening	5/7	\$399	
	Craps-1	Morning, Afternoon or Ev	/ening	5/7	\$599	
	Poker-1	Afternoon or Evenin	ng	4/30	\$459	
	Carnival Games-2	Morning, Afternoon or Ev	ening/	5/21, 6/4 or 6/18	\$199	
	Mini Baccarat/PGP-2	Morning, Afternoon or Ev	ening/	6/18	\$199	
	Blackjack-2	Morning, Afternoon or Ev	ening/	5/7	\$249	
	Roulette -2	Morning, Afternoon or Ev	ening/	5/7	\$269	
	Craps-2	Morning, Afternoon or Ev	ening/	5/7	\$399	
				Total		
I have read and signed the Student Contract.						
Signed:					Date:	
Circle one: MasterCard VISA Discover					Exp. Date MM/YY	