

SPECIAL REGISTRATION APPLICATION FOR STUDENT / MILITARY / GA RAS CANDIDATES

SEND to: Breining Institute, 8894 Greenback Lane, Orangevale, CA 95662 • FAX (916) 987-8823 • College@Breining.edu

SECTION 1. Please type or print all of your information clearly.

[Grid for First Name]

First Name

[Grid for Middle Name]

Middle Name

[Grid for Last Name]

Last Name

[Grid for Address]

Address (Number, Street, Apartment or Suite Number)

[Grid for City]

City

[Grid for State]

State

[Grid for USA Zip Code]

USA Zip Code

[Grid for Primary Telephone Number]

Primary Telephone Number (including Area Code)

[Grid for Secondary Telephone Number]

Secondary Telephone Number (including Area Code)

[Grid for E-mail Address]

E-mail Address

SECTION 2. Breining Institute will use this information for identification purposes.

[Grid for Social Security Number]

Social Security Number (last 4 numbers only)

[Grid for Date of Birth]

Date of Birth (Month-Day-Year)

[Grid for Gender]

Male Female

SECTION 3. Credit Card Payment Information (if paying by credit card): Circle type of card: **VISA** or **MasterCard**

[Grid for Credit Card Number]

Credit Card Number

[Grid for Expiration Date]

Expiration Date

[Grid for Full Name on Credit Card]

Full Name on Credit Card

[Grid for Billing Address]

Billing Address for Credit Card (if different than Address above)

[Grid for City]

City

[Grid for State]

State

[Grid for USA Zip Code]

USA Zip Code

Breining Institute is authorized to charge the \$29 (twenty-nine dollars) to this card.

\$29.00

Authorized Credit Card Signature

Date

SECTION 4. DOCUMENTATION AND FEES: Include all of the following that apply. Checks payable to "Breining Institute"

- Documentation of your student status, military service, or general assistance status, whichever is applicable.
- Registration Fee: **\$29** (Two years registration. Nonrefundable.)
- Current photo. Breining Institute will use this photo for identification purposes, and it will not be returned.
- IF YOU HAVE THE FOLLOWING DOCUMENTATION NOW, YOU MAY ALSO INCLUDE WITH THIS REGISTRATION:
- Documentation of 155 hours formal alcohol or other drug classroom education.
- Documentation of 160 hours supervised alcohol or other drug experience.
- Documentation of 2,080 hours (one year) work experience in alcohol or other drug counseling or similar experience.