



**Mail with Payment:**  
Frederic Community Ed  
1437 Clam Falls Drive  
Frederic, WI 54837

Community Ed Office  
Director: Mary Miller  
Phone or Email: 715-327-4868  
ext.1117 millerm@frederic.k12.wi.us

**Frederic Community Education Registration Form**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*\* If not on our mailing list:

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*Registration Information should be provided in the appropriate spaces below:*

Course Title	Start Date	Fee
1. _____		
2. _____		
3. _____		

Payments

Total Cost: \$

Check made payable to "Community Education"

Cash (prefer checks/please do not send cash in mail)

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