

## METRO MERITUS REGISTRATION FORM

For Office Use Only Received:
ID Issued & Emailed:
Entered in Banner:

The program allows persons 60 years of age and over to take classes for free at MSU Denver on a non-credit basis Classes are audited, which means no testing, no written assignments, no grades, & no transcripts.

\*\*Restrictions apply - see page 1\*\*

Participant (First Name, N	Aiddle Initial, <mark>Current La</mark>	st Name) OTHER LAST NAM PARTICIPANT.	OTHER LAST NAME(S) USED AS A METRO MERITUS PARTICIPANT.  Emergency Contact (First Name, Last Name)  Emergency Contact's Phone Number  Emergency Contact's Email Address	
Participant's Preferred Er	nail Address	Emergency Conta		
Participant's Street Address	(NO P.O. BOXES)	Emergency Contact		
City, State, Zip Code		Emergency Conta		
Phone Number	Date of Birth	Participant's Pronouns	Semester Attending	
Course Registration #*	Department	Course Title	Instructor Signature**	
*CDV C P	N. 1	digit CRN is listed in the class scheo		
rticipant Agreement: I wellerstand that I will pay no tropolitan State University rses, or to my presence in	ver.edu.  vish to apply as a Metro I tuition and that I will recover is under no I buildings owned or leastional processes and political versions.	ceive neither credit nor a grade fliability for damage or injury to a sed by Metropolitan State Universies including the MSU Denver	course(s) list above on a non-credit basis for my participation. I further understand my person resulting from my participatio rsity of Denver. I understand that I am Student Code of Conduct. This policy ca	
Please indicat	e special access, if an	y, you may require in order	to participate in this class:	
Computer La	ab Co	mputer Account (email)	Other Access	
This information mus	t be provided each se	nires your MSU Denver identi mester you enroll. tion number, it will be assigne		
00	I am new to the I	Metro Meritus Program.	]	
90	Lam proviously	offiliated with MSII Denver	outside of Metro Meritus	

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