



**Registration Form**  
 Admissions and Records Office  
 1500 College Parkway  
 Elko, Nevada 89801

Phone: 775.327.2059      Fax: 775.327.5071      Email: admissions@gbcnv.edu

Date: \_\_\_\_\_ Semester:     Spring     Summer     Fall

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

GBC ID: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:    Day \_\_\_\_\_ Evening \_\_\_\_\_

Class Number	Department	Course Number	Section Number	Units	Unit or Audit	Weekdays	Time	Class Fees

**By registering for classes, students agree that they are responsible for payment of all associated fees.**

**Fees are due and payable at the Controller's Office at the time of registration.**

**Please make check payable to the "Board of Regents."**

Signature: \_\_\_\_\_