

**ADD/DROP FORM**

This form is for enrollment in the:  Fall Semester  Spring Semester  Summer Semester

Today's Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name (First and Last) \_\_\_\_\_

Street Address / Apt. # / City / State / Zip \_\_\_\_\_

Phone (Area Code and Number) \_\_\_\_\_ Alternate Phone (Area Code and Number) \_\_\_\_\_

**ADDING**

COURSE #	SECTION	DAY	TIME	INSTRUCTOR

**DROPPING**

COURSE #	SECTION	DAY	TIME	INSTRUCTOR

**PAYMENT INFORMATION**

Please charge my:  American Express  Discover  MasterCard  Visa

Card Number \_\_\_\_\_ CVC \_\_\_\_\_ Expiration Date (Month / Year) \_\_\_\_\_

Signature \_\_\_\_\_ Date (Month / Day / Year) \_\_\_\_\_

*If no credit card is provided, refund (if any) will be processed as a check. Please refer to Course Catalog for information on refunds.*

**SUBMIT COMPLETED FORM AND PAYMENT (IF ANY) TO:**

**Mailing:** Glassell School of Art  
 Attn: Registrar  
 The Museum of Fine Arts, Houston  
 P. O. Box 6826  
 Houston, TX 77265

**Hand-Delivery:** Glassell School of Art  
 5101 Montrose Blvd.  
 Houston, TX 77006  
 Room 324  
**E-mail:** registration@mfa.org

FOR OFFICE USE ONLY: ADJUSTED TUITION / FEES		
TUITION (\$)	TUITION (\$)	SUB TOTAL (\$)
1. _____	3. _____	_____
2. _____	4. _____	_____
		TOTAL \$ _____