



# Class Enrollment

Mail Enrollment Form with payment to:

Horticultural Therapy Institute  
P.O. Box 461189  
Denver, Co. 80246.

Fax: 303-388-1914

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

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

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

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

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

Enclosed is \$ \_\_\_\_\_ Check

\_\_\_\_ Visa \_\_\_\_ MC Card# \_\_\_\_\_

Expiration date: \_\_\_\_/\_\_\_\_

Lunch Preference if Applicable:

\_\_\_\_\_ Healthy Standard \_\_\_\_\_ Vegetarian

Name of class & location:

\_\_\_\_\_

No cash refunds will be given. Students who are unable to attend a class will be given credit towards future classes through the HT Institute. A \$125 processing and materials fee will be charged at the time of subsequent enrollment. Credit must be used within 12 months. If you cannot attend a course, notify us at 303-388-0500 as soon as possible as other students may be on a waiting list to attend the class. Class credits cannot be redeemed for cash.