Hennepin Technical College℠
CUSTOMIZED TRAINING SOLUTIONS

MINNESOTA STATE

Motorcycle Safety Basic Rider Transfer Form

Payment must accompany this transfer form. Email the completed form to cts.registration@hennepintech.edu

Please print your information as it appears on your drivers license.

First Name_____ **Last Name** _____ **Middle Name**_____

Home Address: _____ **City** _____ **State** _____ **Zip** _____

Home Phone _____ **Cell Phone** _____

Email Address _____

Course Section # to be transferred into:	Course Dates:	Transfer Fee:
		$30.00

Transfer Fee Billing information:

Credit Card # ☐ **VISA** ☐ **MasterCard** ☐ **Discover**

_____ **Exp. Date** _____
Month/Year

Card Billing Address _____
If different from Home Address

Name on Card _____

Cardholder's Signature _____ **Date** _____

By signing I am agreeing to have the transfer fee charged to the above credit card and understand that there are no additional transfers or refunds for my registration in the Motorcycle Safety Basic Rider courses with Hennepin Technical Colleges Customized Training Services.