

Request for Extension Foundation to Collect Fees for Online Courses

Course Teacher/Coordinator

Name: _____

Email Address: _____ Phone: _____

Name of Course/Event: _____

Registration Fee Amount: \$ _____ Other pricing options: _____

Agreement: It is understood that fees collected for courses or events offered through campus.extension.org will be deposited with the Extension Foundation. Unless governed by a separate institutional or course-specific agreement, the undersigned agrees that the Extension Foundation will retain 5% of any such registration fees net of credit card and transaction fees. The Extension Foundation will further receive, process, and distribute these fees as described in the Foundation's Terms of Use (<https://extension.org/terms-of-use-special-circumstances/>)

Coordinator Signature: _____ Date: _____

Fees are to be distributed to:

Name of institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Institution's Fiscal Representative

Name: _____ Email: _____

Signature: _____ Date: _____

Scan and email this form to cataloghelp@extension.org