



**Amarillo College**

# Freedom from Tobacco

**Course Description:** If you want to quit smoking, vaping, dipping, or chewing, then this 2-session, 5-hour course is for you. Tobacco treatment specialists trained through the Mayo Clinic will provide you with the necessary tools to tackle nicotine cravings and prepare you for a Quit Date. Studies have shown that working with a tobacco treatment specialist doubles your chances of stopping smoking. This class is a joint initiative with Tobacco Free Amarillo, so it is FREE. In addition, if you are over 18, you may be eligible to receive a **free starter supply of nicotine replacement therapy products (patches, gum, lozenges)**. Additional post-course support will be discussed to help you succeed at quitting and remaining tobacco-free. A certificate will be provided upon completion of the course. This program can help those who just need a little extra push, as well as those who have almost given up – and everyone in between. People who quit using tobacco save money and feel healthier and more in control. You CAN succeed, and we can help.

## May 2026 – August 2026

**Cost:** The cost of this course is \$25 **FREE!** **Class transfers must be requested at least one day prior to the start of class.** After this period, students will be required to register for another class.

**Registration:** Full registration instructions are located on the back of this form. **Students are required to register prior to the first class. It is recommended that students register as early as possible, because classes reach maximum enrollment quickly.**

**Enrollment Eligibility Notice:** Students with outstanding obligations to Amarillo College may not be allowed to enroll in or complete a continuing education course until the obligations are fulfilled. Students who have received a Criminal Trespass Warning from Amarillo College will not be allowed to enroll in courses held on any AC campus unless the warning has been lifted.

**Attendance:** Students must be on time and attend all sessions in consecutive order. There will be no exceptions or make-up classes allowed. Students are required to bring a translator with them if they have limited or no proficiency in the English language.

**Questions:** For questions regarding our programs, call (806) 457-4452 or (806) 457-4468 or e-mail [rrdominguez@actx.edu](mailto:rrdominguez@actx.edu). Se habla español. You may also visit us online at [www.actx.edu/intervention](http://www.actx.edu/intervention).

Any student who, because of a disabling condition, may require some special arrangements in order to meet course requirements should contact disAbility Services (Enrollment Center, Suite 700, Phone 345-5639) as soon as possible.

Course ID #	Days	Dates	Times	Location
240036	Tues/Thurs	May 19, 21	6:00pm-8:30pm	AC First Responders, 3891 Plains Blvd, Room 1057

Course ID #	Days	Dates	Times	Location
241613	Mon/Wed	June 15, 17	6:00pm-8:30pm	AC First Responders, 3891 Plains Blvd, Room 1057

Course ID #	Days	Dates	Times	Location
241614	Mon/Wed	July 20, 22	6:00pm-8:30pm	AC First Responders, 3891 Plains Blvd, Room 1057

Course ID #	Days	Dates	Times	Location
241615	Mon/Wed	August 17, 19	6:00pm-8:30pm	AC First Responders, 3891 Plains Blvd, Room 1057

**\*\*\*FREE CLASS SPECIAL – CALL (806) 457-4452\*\***

## Phone Registration

- Call Intervention Programs, (806) 457-4452, and provide the information on the registration form below.
- No acknowledgement will be mailed.

## Mail Registration

- Complete the registration form, and mail to:  
AMARILLO COLLEGE  
INTERVENTION PROGRAMS  
PO BOX 447  
AMARILLO TX 79178
- No acknowledgement will be mailed.

## FAX Registration

- Complete the registration form, and fax to: Intervention Programs, (806) 457-4457.
- No acknowledgement will be mailed.

## In-Person Registration

**FIRST RESPONDERS ACADEMY, 3891 Plains Blvd., Room 1007, Amarillo, TX**

### **HOURS VARY BY CAMPUS LOCATION AND DURING HOLIDAYS/SUMMER**

Please call AC Intervention Programs at (806) 457-4452 for current hours.

#### **Registration Form – Freedom from Tobacco**

Course ID#: \_\_\_\_\_ Beginning Date: \_\_\_\_\_

Last 4 digits of Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Residency Status: \_\_\_ Texas Resident \_\_\_ Out-of-State \_\_\_ Foreign Country

Gender: \_\_\_ Male \_\_\_ Female    Personal E-mail: \_\_\_\_\_ Business E-mail: \_\_\_\_\_

Ethnic Origin: (Voluntary Information – Will not affect enrollment) \_\_\_ White \_\_\_ American Indian \_\_\_ Alaskan Native \_\_\_ Black  
\_\_\_ Asian/Pacific \_\_\_ Islander \_\_\_ Hispanic \_\_\_ International

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS COMPLETE AND CORRECT.

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

# **FREE CLASS – SPECIAL OFFER**