

REGISTRATION FORM

Whittemore-Durgin's Stained Glass Courses beginning Monday, April 3, 2017

If you have taken classes within the past year, you only need to fill in your name and any information that may have changed.

Name _____ E-mail: _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number: Days _____ Evenings _____

I wish to enroll in the following session: (please check one.)

_____ Beginners, registration fee \$120.00 _____ Advanced, registration fee \$100.00

My registration fee is enclosed (please check one).

_____ Cash _____ Check _____ Credit card.

We accept the following credit cards. Please be sure to give us the cardholder's account number, name and expiration date. (If you are reasonably certain that we have your card information on file, you only need to indicate which card to use.)

☐ MASTERCARD ☐ VISA ☐ DISCOVER ☐ AMERICAN EXPRESS

Card number: _____ Expires _____

Signature of Cardholder _____

I wish to enroll in the following course (please check one).

_____ BEGINNER 10:00 A.M. to 12:00 P.M. _____ ADVANCED 12:30 P.M. to 2:30 P.M.
_____ BEGINNER 6:00 P.M. to 8:00 P.M. _____ ADVANCED 6:00 P.M. to 8:00 P.M.
(concurrent with Beginner Class)

Course Dates:

April 3, 10, 17, 24

May 1, 8, 15, 22

Please list special interests and goals below so that our instructor will be better prepared to help you to accomplish your objectives.

Please mail this completed form, along with your payment, to:

Whittemore-Durgin Glass Co.

825 Market Street

Rockland, MA 02370