

REGISTRATION FORM
Whittemore-Durgin's Leaded Glass Course
beginning Saturday, April 14, 2012

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 8-week Saturday Beginner Lead Course. My \$120 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, just indicate which card you want us to use.)

MASTERCARD _____ Expires _____

VISA _____ Expires _____

AMERICAN EXPRESS _____ Expires _____

DISCOVER _____ Expires _____

Signature of Cardholder _____

Course dates: Saturdays

April 14, 21, 28; May 5, 12, 19 (No class May 26); June 2, 9

Course time: 10:00 a.m. – 12:00 noon

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.

P.O. Box 305

Rockland, MA 02370