



Registration Form – CTWS Fall '17 Four Day Workshop

Karen Vernon, ACT. BWS, TWS WAS-H	http://www.karenvernon.com
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Date/Time of Opening Reception, Critique & Awards: Monday, October 30th from 5:30 pm - 8:00 pm

Date/Time of Workshop: October 31 – November 3 (Tuesday to Friday), 2017 from 9 AM to 4:30 PM

Place of Workshop: The Carleen Bright Arboretum (at the 'church'), Woodway, TX 76712

Cost of Workshop: \$50 deposit will hold your place until September 27th

Balance will be due September 27th

Preference is given to Members until September 27th

\$250 for CTWS Members (\$250 - \$50 Deposit = \$200 Balance Due)

\$300 for non- members

\$35 separate check for catered lunch due made out to Beverly Balch (caterer) by Sept. 27th.

Name:

Date:

Printed Name:

Birthday: Month ____ Day ____

Address:

City & Zip

Phone Number: (Home)

(Business)

Cell Phone:

Email:

Indicate membership (check one of the following): **CTWS Member** **Non-member**

Method of Payment (check one): Check Cash Make checks **payable to CTWS** & indicate “**2017 Fall Workshop**” on the **memo line**. **Registration form & deposit must be furnished together**, and should be mailed to **CTWS, Attn: Cheryle Chapline, 8301 Whippoorwill, Woodway, TX 76712**.

I understand that I must keep my immediate area clean (bring a sack for your trash), **furnish my own table cover**. I understand and agree to leave The Arboretum **PROMPTLY** at 4:30 PM each day (sensitive to Arboretum staff)

Any cancellations and refunds must be requested for consideration from Cheryle Chapline at 254-717-1149, or cachapline@yahoo.com (Tag as RE: Fall '17 Workshop).

Signed _____

Name _____ (Printed)

CTWS Use Only: \$50 Deposit \$250 (Member) \$300 (Non-Member) \$35 Beverly Balch

Dates Received: _____

