WORKSHOP REGISTRATION FORM

WORKSHOP:			
TUTOR:		DATE:	
MEMBER FEE:		NON-MEMBER FEE:	
YOUR NAME:			
ADDRESS:			
PHONE (HOME):		PHONE (MOB):	
E-MAIL ADDRESS:			

Please note: Workshops will be filled in the order in which applications are received.

To secure a position, this application form may be submitted with a deposit of $5.00 or more, or the full fee.

This signed form must be given to the Co-ordinator by the start of the workshop.

Account Name **REDLAND YURARA ART SOCIETY INC.**
For Direct Deposit **BOQ** BSB 124025 Acc 10322738
REFUNDS ARE GIVEN IF WORKSHOP IS CANCELLED BY YURARA.

I enclose Cash / Direct Deposit details or will undertake to pay by EFT on the day of the event, to the amount of :	*$* *Date Paid:*
My balance payable is:	*$*

I hereby indemnify Redland Yurara Art Society Inc. against responsibility for any accident, loss or injury suffered by me during the course of the activity.

I have read and agree to the above conditions:

SIGNED: _____

PLEASE RETURN COMPLETED FORM & NOTIFICATION OF DEPOSIT TO:
Arja Tossavainen (Workshop Co-convenor)
Mob: 0490 224 553 e-mail: aktoss@gmail.com