



## Artists Interactive Event—Mail or Fax-in Registration Form

\*Please use this form for classes or demonstrations where the instructor is requesting registration be done by mail or fax. Please fill out a separate form for each additional class you would like to register for.

Event Name: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

Location: \_\_\_\_\_

Date & Time: \_\_\_\_\_

Class cost: \$ \_\_\_\_\_

**Send completed registration form along with check (made payable to the artist.)**

**Please fill out the form below:**

First: \_\_\_\_\_ Last: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

**To register, please return this completed form to the mailing address, fax number or email address indicated by the instructor.**