Sun Country Quilters Guild <u>Workshop Sign-Up Form</u>

Workshop Title:	
Teacher:	Kit \$
Date / Time:	Pattern \$
Cost Members \$_	/ 🗌 Cost Non-Members \$
NAME:	
STREET ADDRESS:	
CITY, STATE, ZIP:	
PHONE# HOME	CELL:
EMAIL:	
 Once your registration has be <u>DO NOT SEND A SUBSTITU</u> Mail this completed form person) at a guild meeting. Thank You Workshop/ Program Chail 	ease contact the Workshop Chair ASAP een confirmed there are <u>NO Refunds</u> , unless the vacancy can be filled <u>TE for yourself</u> . There may be others on a class waiting list who have first priority. and payment (address below) or you can deliver to the Workshop Chair (in
FOR SCQ Use Only:	
Total RCVD: \$	Cash 🔲 / Check # 🗌
Date RCVD:	RCVD By