

AIRBRUSH WORKSHOP
REGISTRATION FORM

Please book me in to the following workshop:

<input type="checkbox"/>	6/7 Feb	Beginner/ Intermediate	Port Kennedy	\$280
<input type="checkbox"/>	20/21 Feb	Beginner/ Intermediate	Bunbury	\$280
<input type="checkbox"/>	10/11 Apr	Beginner/ Intermediate	Port Kennedy	\$280
<input type="checkbox"/>	5/6 Jun	Beginner/ Intermediate	Port Kennedy	\$280
<input type="checkbox"/>	7/8 Aug	Beginner/ Intermediate	Port Kennedy	\$280
<input type="checkbox"/>	2/3 Oct	Beginner/ Intermediate	Port Kennedy	\$280
<input type="checkbox"/>	4/5 Dec	Beginner/ Intermediate	Port Kennedy	\$280

Name: _____

Address: _____

Suburb: _____ Postcode: _____

Tel: _____ Mob: _____

Email: _____

Dietary requirements (allergies, vegetarian etc.)

To secure your place in the workshop a \$90 deposit must be made upon booking.

Please make bank cheques or money order payable to Creative Works.

Direct Deposit ANZ Bank

Account Name - Creative Works BSB - 016358 Account No. - 198973624

Refunds will not be given for cancellations made less than 5 days prior to commencement of workshop.

Signature: _____