



Lost River Artisans Class Registration Form

Student Information

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Course Information

Class Title: _____ Instructor: _____

Day/Time: _____ Cost: _____

Payment Information

_____ Payment attached (check, money order payable to Lost River Artisans Cooperative)

_____ Visa _____ MasterCard _____ American Express

Card # _____ Expiration Date _____

Name on Card: _____

By submitting and signing this form, you acknowledge that you agree to abide by the policies set forth by Lost River Artisans. Cancellations must be received one week prior to the start of the class. A full refund will be given if the cancellation is received one week prior to the start of the class to ensure other students on the waiting list may register. There is a \$15 non-refundable registration fee (included in the registration fee).

Name (Please Print) _____

Signature _____

Date _____