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**CHARLES REID
Watercolor Workshop**

March 23-27, 2009

Registration Form

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Hm Phone _____ Wk _____

Cell _____

The Fee for the five (5) days is \$650.00. A deposit of \$200.00 is due with registration form. The final Payment of \$450.00 is due 45 days prior to the workshop. Due date is February 8, 2009.

Cancellation Policy: A refund of \$100.00 will be applicable if cancelled no later than February 8, 2009. No refunds will be available after February 8, 2009.

Please enclose your deposit of \$200.00 by check made payable to City Art Gallery and mailed to 1224 Lincoln Street, Columbia, SC, 29201.

Payment by credit card: MC ___ VISA ___ DISC ___ AMX ___

Card # _____ Exp. ___/___/_____

Name on the card _____

Security Code (3digits) _____ Billing Zip Code _____

Signature _____

