

# Course Registration Form

REGISTRATION

Student Name: \_\_\_\_\_

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

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

Tel. (home): \_\_\_\_\_ Tel. (work): \_\_\_\_\_

E-mail: \_\_\_\_\_

Parent's Name if student is under 18: \_\_\_\_\_

Child's date of birth (for children's classes): \_\_\_\_\_

I am a:	
Member:	___
Non-Member:	___
New Member:	___
(add dues below)	

I give permission for my child to be photographed for promotional purposes.

Course/Workshop: \_\_\_\_\_ Day/Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Course/Workshop: \_\_\_\_\_ Day/Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Course/Workshop: \_\_\_\_\_ Day/Time: \_\_\_\_\_ Fee: \_\_\_\_\_

## Payment:

My check in the amount of \$\_\_\_\_\_ is enclosed.

Please make checks payable to Duxbury Art Association

Charge my  Visa  MasterCard

Expiration date \_\_\_\_/\_\_\_\_/\_\_\_\_

Acct: \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Billing Address (if different than address above): \_\_\_\_\_

Total Tuition: \_\_\_\_\_

Membership Dues: \_\_\_\_\_

TOTAL: \_\_\_\_\_

## Annual Membership

Membership year runs from June 1, 2004 through May 31, 2005.

New Membership begins June 1, 2004!

- \_\_\_ \$25 Student (up to age 21 with student ID)
- \_\_\_ \$25 Senior (age 65 and older)
- \_\_\_ \$35 Individual
- \_\_\_ \$50 Family
- \_\_\_ \$80 Sponsor
- \_\_\_ \$100 Patron
- \_\_\_ \$250 Benefactor
- \_\_\_ \$500 Sustaining
- \_\_\_ \$1000+ Angel

*Renew Today!*

Call us at 781-934-2731 x 4 or visit us on the web at [www.duxburyart.org](http://www.duxburyart.org)

Please detach this page and mail with payment to:  
 Duxbury Art Association  
 P.O. Box 204A  
 Duxbury, MA 02331-0504

Membership contributions are tax deductible to the extent the law permits.

DAA is eligible for corporate matching gifts. Please include your company's matching gift form!