

Peters Valley Craft Center

2008 workshop application



19 Kuhn Road, Layton, NJ 07851
(973)948-5200 Fax: (973)948-0011
www.petersvalley.org pv@warwick.net

(For PV office use only)
Date received _____

Name: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

WORKSHOP TITLE: _____ TUITION = \$ _____

DATES: _____ LAB FEE = \$ _____

Dates desired for LODGING: _____

Lodging Level _____ Single Room ()

nights _____ @ \$ _____ Each LODGING = \$ _____

For housing purposes: () Female () Male LINEN RENTAL (\$10)= \$ _____

Vegetarian meals? () Yes () No MEAL PLAN = \$ _____

Dinner the night before the workshop starts (\$14) ADDITIONAL DINNER = \$ _____

TOTAL TUITION, LAB FEE, LODGING, LINENS & MEALS = \$ _____

Less Membership Discount if Applicable = \$ _____

Would you like to become a member? MEMBERSHIP = \$ _____

Add ONE TIME NON-REFUNDABLE \$30 REGISTRATION FEE * = \$ _____

*(Current Members DO NOT pay this fee)

TOTAL PAYMENT ENCLOSED = \$ _____

Make checks payable to: PETERS VALLEY

CHARGE TO MY: Amex VISA Discover MasterCard

Card Number _____ Exp. Date _____ Signature _____

IN CASE OF AN EMERGENCY, WHOM MAY WE CONTACT?

Name: _____ Telephone/Day: (_____) _____

SPECIAL NEEDS? _____

How did you hear about Peters Valley? _____