

36 Beach Street, Wickford, Rhode Island 02852 401.294.6840 www.wickfordart.org

Class Registration Form

Full payment must be included to complete registration and class enrollment. Please make check payable to The Wickford Art Association and return to the above address.

Please print legibly		
STUDENT NAME		
STREET ADDRESS		
CITY	STATE	ZIP
TELEPHONE	EMAIL ADDRESS	
CLASS NAME		
CLASS INSTRUCTOR		
CLASS DAY/TIME		
CLASS FEE: (MEMBER / NON-MEM (Non-member class fees are \$35 more the	BER)nan Members. Annual Membership is \$50.)	
start of a class for a refund, less the \$2 registration. WAA may find it necessary notified and refunded the FULL course class sizes are limited and enrollment if and contact information will be added to WAA is not able to prorate class fees for Photo Policy - WAA takes photographs of classes, open	is on a first come, first received basis. If the maxim	receive a confirmation email of their soccur, registered students would be num class size is reached, your name on refunds issued.
Student Signature and Date		
I would like to join your mail	ing list to find out more about upcoming shows, eve	nts and classes at WAA.