

Hudson River Valley Art Workshops Enrollment Form

Please print this form, fill it out and mail, email or fax to:

Hudson River Valley Art Workshops
info@artworkshops.com
PO Box 659
Greenville, NY 12083
Fax: 1-518-966-8754

NAME (Mr., Mrs., Ms.) _____

Nickname _____

ADDRESS _____

City _____ State _____ Zip _____ - _____ Country

_____ Phone (_____) _____

Email Address _____@_____

WORKSHOP/ARTIST _____

Arrival Date ____/____/____ Departure Date ____/____/____

DOUBLE OCCUPANCY, I will be sharing with: **non-student** or **fellow student**

PLEASE FIND ME A ROOMMATE

I understand if no roommate can be found, I will be enrolled at single rate.

SINGLE OCCUPANCY (No roommate)

DAY STUDENT

AN eINVOICE WILL BE EMAILED TO YOU FOR THE \$425 DEPOSIT (per person)

Your enrollment will be confirmed when payment of the deposit is received.

Dietary restrictions - please list everything you cannot or do not wish to eat:

We may not be able to accommodate dietary restrictions if we do not know about them in advance.

Enrollment in a workshop indicates that you have read and understand the terms of enrollment.