

Registration Form - Warren Fine Arts Center Courses

Please Print () Current WTCFA Member () Renewal () Non- Member () New Member Date Registering ___/___/___

Last Name: _____ First Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Day Phone _____ Evening Phone _____ Email _____

	Course #	Start Date	Short Title	Instructor	Tuition: Course	Tuition: Model	Tuition: Mat'l Fee	Tuition: Total
1								
2								
3								

Method of Payment: Cash () Check # _____ (Make check payable to **Warren Tri-County Fine Arts, Inc.**)

A full refund of the class fee will be given for any class canceled by WTCFA . No refund will be given on Membership or Material fees.

Mail to: **Warren Fine Arts Center Class Registration** **Class Total** \$ _____
5460 Arden, Room 418, Warren Community Center **Membership Total *** \$ _____
Warren, MI 48092 Phone (586) 268-7914 www.warrenfinearts.com **Grand Total** \$ _____

* Membership information : Individual \$40/year, Family \$65/yr. Dues are discounted \$5 from April 1 to May 31 each year.

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