

REGISTRATION FORM FORT MASON CALLIGRAPHY CLASSES

Please fill it out, making a mark beside the course number of the course(s) you want to enroll. Print this form. Make your check payable to **FRIENDS OF CALLIGRAPHY** mail it to:

COORDINATOR, FORT MASON COURSES
FRIENDS OF CALLIGRAPHY
P.O. BOX 425194
SAN FRANCISCO, CA 94142-5194

NOTE: BEFORE SENDING IN YOUR FORM. PLEASE READ OUR REFUND POLICY BELOW:

Please contact Elizabeth thewaytorite@aol.com, if you want to snailmail your form directly to her home address. Save paper. You may cut and paste the info below in your own word processor and include only the class you want to enroll.

2012 Classes

1. _____ **GREENWOOD, BLACKLETTER**, Tuesdays, January 17, 24, 31, February 7, 14, 21, 28 **\$150.00-non-members; \$140.00-FOC members**
2. _____ **DIETERICH, COPPERPLATE**, Wednesday, March 7, 14, 21, 28, April 4, 11, 18 **\$150.00-non-members; \$140.00-FOC members**
3. _____ **DETRICK, BOOKHAND**, April 24, May 1, 8, 15, 22, 29, June 5 **\$150.00-non-members; \$140.00-FOC members**
4. _____ **TITONE, ITALIC CALLIGRAPHY**, Tuesdays, September 11, 18, 25, October 2, 9, 16, 23, **\$150.00-non-members; \$140.00-FOC members**
5. _____ **COLTRIN, CURSIVE ITALIC HANDWRITING**, Tuesdays October 30, November 6, 13, 20), **\$85.00-non-members; \$80.00FOC members**

\$ Total tuition enclosed _____

Save money. Become a member for \$40 and receive discounts, journals, newsletters.

REGISTRANT OR STUDENT :

NAME: _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE : Work _____

Home _____

email _____

Please check if desired . DO NOT INCLUDE MY ADDRESS _____ PHONE _____
EMAIL _____ on the published & distributed list.

Class is limited to 16 students.

REFUND POLICY: Refunds should be requested two weeks before the class begins. If there are other students on the waiting list to replace your spot, a refund can also be granted.

RULES OF PRIORITY:1. Date of Email or Snail Mail and a Check Deposit

FORTMASON WEBSITE: <http://www.fortmason.org/>

