



# WORKSHOP REGISTRATION

**Location: Grace Church**

**4 Madison Avenue**

**Madison , NJ 07936**

To register, please print and complete this form. Mail it with payment to:

**GSQ, P.O. Box 424, Chatham, NJ 07928.** No seat is guaranteed until payment is received.

On your check please note with class(es) you are taking.

**IMPORTANT:** Workshops are 10:00 AM-3:30 PM and you may arrive at 9:30 AM to set up.

**NOTE:** No food, water or coffee will be provided. Please bring your own lunch, drinks and snacks.

**MEMBER/NON MEMBER \$60.00**

**Name:** \_\_\_\_\_ **Y** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

## WORKSHOP NAME AND DATE:

1. \_\_\_\_\_

2. \_\_\_\_\_

**CANCELLATION POLICY:** You will be refunded if you cancel 21 days or more before each workshop or if there is a waiting list. If there is not a waiting list your money is forfeited unless you can find your own replacement.

## Emergency Contact Information:

**Name and relationship:**

**Phone#:** \_\_\_\_\_

**Important medical info:** \_\_\_\_\_

**Accepted by: (initials)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Check#** \_\_\_\_\_ **Cash** \_\_\_\_\_ **Credit** \_\_\_\_\_