



# ADULT CLASS REGISTRATION FORM

**PLEASE PRINT CLEARLY.**

**SEND YOUR COMPLETED FORM TO:**

Glenhyrst Art Gallery of Brant, 20 Ava Rd., Brantford, ON N3T 5G9

• Phone: (519) 756-5932 • Fax: (519) 756-5910

All Cheques should be made payable to Glenhyrst Art Gallery of Brant

\_\_\_\_\_  
\*PARTICIPANT'S NAME

\_\_\_\_\_  
\*CLASS TITLE

\_\_\_\_\_  
\*PARENT/GUARDIAN NAME

\_\_\_\_\_  
\*START DATE OF SESSION

\_\_\_\_\_  
\*CLASS FEE

\_\_\_\_\_  
\*ADDRESS

\_\_\_\_\_  
\* CLASS TITLE

\_\_\_\_\_  
\*CITY

\_\_\_\_\_  
\*PROVINCE

\_\_\_\_\_  
\*POSTAL CODE

\_\_\_\_\_  
\*START DATE OF SESSION

\_\_\_\_\_  
\*CLASS FEE

\_\_\_\_\_  
\*TELEPHONE (HOME)

\_\_\_\_\_  
\* (CELL)

\_\_\_\_\_  
\*EMAIL

**\*PLEASE READ: I hereby give permission for my child to be photographed for publicity/advertising purposes.**

\_\_\_\_\_  
\*SIGNATURE

Become a member of Glenhyrst Art Gallery at registration and pay the Member's class fee.  
**(Junior/Youth/Senior - \$20; Individual - \$30; Family - \$40)**

**MEMBERSHIP FEE: \$** \_\_\_\_\_

**TOTAL PAYMENT: \$** \_\_\_\_\_

**PAYMENT METHOD:**

CASH

CHEQUE

DEBIT

VISA

MASTERCARD

\_\_\_\_\_  
\*CARD NUMBER

\_\_\_\_\_  
\*EXPIRY DATE

\_\_\_\_\_  
\*SIGNATURE