

Guild School 2022

Registration Form

Name: _____

Telephone: _____ Mobile: _____

Email Address: _____

Address: _____

City: _____ State/Province: _____ Zip: _____ Country: _____

Class Choice(s)

When assigning classes, we will always "move up" to your first choice, if possible. **Do not repeat a class.** If you are **EQUALLY** happy with any of your choices, please make a notation. **You must provide four choices.**

FIRST CHOICE

	<i>Length of Class</i>	<i>Instructor & Class Project</i>	<i>Time Slot</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

SECOND CHOICE

	<i>Length of Class</i>	<i>Instructor & Class Project</i>	<i>Time Slot</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

THIRD CHOICE

	<i>Length of Class</i>	<i>Instructor & Class Project</i>	<i>Time Slot</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

FOURTH CHOICE

	<i>Length of Class</i>	<i>Instructor & Class Project</i>	<i>Time Slot</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Please complete other side

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Name (please print): _____

\$1700 Standard tuition—36 hours of instruction, shared room, meals

\$950 36 hours of instruction only—off-campus (no room or meals)

\$300 Additional 12-hour class

\$675 Shared room and meals for non-participating guest

Total Current Charges

Other charges, when applicable, will be made to your account as arrangements are made during the next few months for such things as private room, airport shuttle, early arrival and seminars.

Deduct:

\$200 Minimum deposit paid previously through pre-registration

or

\$200 Minimum deposit required to register, enclosed with this form

\$25 Courtesy IGMA membership discount (one per family)

\$1700 Scholarship

Total Current Deductions

Total Current Balance (payable anytime before April 1, 2022)

Method of Payment:

Check—made payable to IGMA Guild School (US banks only)

VISA or Master Card

Credit Card # _____ 3-Digit Security Code _____

Expiration Date _____ Amount to be charged now _____

Name under which card is issued (please print) _____

Signature _____

Check this box if you want the balance due on your account to be charged to your credit card on or shortly after April 1.

Send registration form and deposit to: Barbara Davis
3485 North Main Street
Soquel, CA 95073
guildschooligma@gmail.com
For information,
call 831-464-4638

(Please DO NOT send by mail requiring signature upon delivery)

