



9341 Mill St., Ben Lomond, CA 95005

CAMP JOY GARDENS

131 Camp Joy Road, Boulder Creek, 95006

WORKSHOP REGISTRATION FORM

Sunday May 23, 2009

9:30 AM-3:00 PM

(Please fill out and return to the Art Center address above)

Name of Participant _____

(Please print)

Name of parent or guardian if participant is a minor _____

(Please print)

If participant is a minor, a parent or guardian must sign below acknowledging permission for the minor to participate in the workshop and that he/she has read and is in agreement with this contract.

Address _____ (City) _____ (zip code) _____

Phone (day) _____ (Evening) _____ E-Mail _____

Cost of workshop (\$25) _____ Paid: Check (#) _____ Cash _____ Charge _____

Charge Card Number _____ Expiration Date _____

(only VISA, Master Card, Novus, Discover cards are accepted)

Signature of card holder _____

The undersigned participant in this workshop sponsored by the Santa Cruz Mountains Art Center and Camp Joy Garden hereby acknowledges that participant assumes all risk for any injury, loss or damages of any nature during the course of this weekend workshop.

The participant also understands that she/he will receive no refund for this workshop unless it is cancelled by the Art Center or Camp Joy Garden. Rain checks or refunds given in case of rain.

It is further acknowledged by the participant that the Art Center, Camp Joy, their officers, members, employees and agents, accept no responsibility or liability whatsoever for any injury, loss or damage to participant's personal equipment or artwork.

Date _____

Signature of Participant

Signature of Parent or Guardian