Registration Form

Silvermine School of Art 1037 Silvermine Road New Canaan, CT 06840-4398

Please print this page and fax to 203.966.8570 or mail to above address.
Any questions please contact us at school@silvermineart.org or 203.966.6668 x 2

Name in Full: Last: _____ First: _____ Middle: _____

Address: _____

City: _____ State: _____ Zip: _____

Home: _____ Cell: _____ Work: _____

Email: _____

Date of Birth: (if under 18 years old) _____ Name of Parent/Guardian: _____

Former Student? *(Circle one)* Yes No

Course Title	Day	Time	Price

Non Refundable $35 Registration Fee _____ *$35.00*

Silvermine offers scholarships on a need basis and provides outreach classes in the Stamford & Norwalk Public Schools through Art Partners. Please consider an additional donation towards these programs.

Tax Deductible Donation: _____

TOTAL: _____

Method of Payment: (Circle One) Cash Check **Please make payable to Silvermine School of Art*

Mastercard / Visa Credit Card # _____

Expiration Date: _____ 3 Digit Security Code on Back of Card: _____

Name and Address on Credit Card if different from above:

_____

_____

Signature: _____

For full course descriptions and supply lists, visit our website, www.silvermineart.org **203.966.6668 x2**