

**2016 - 2017 CCQ Workshop Registration Form**

Registration will open **May 12, 2016**

Bring this form with payment to May 12<sup>th</sup> or June 9<sup>th</sup> CCQ meeting or mail to:

Karan Brooks 4016 NE 166<sup>th</sup> Ave. , Vancouver, WA 98682

**Mail-in Registration is encouraged to avoid long lines on sign-up nights.**

*Please note workshop prices vary for CCQ members. Charge is based upon instructor's daily rate.*

Name: \_\_\_\_\_

Address \_\_\_\_\_

Area /Telephone \_\_\_\_\_

Email \_\_\_\_\_

1. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

2. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

3. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

4. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

5. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

6. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

7. Workshop Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

Cash or Check # \_\_\_\_\_ Name of person accepting money: \_\_\_\_\_

Total \_\_\_\_\_