CONTACT INFORMATION
First ___________________________________________ Name Tag _________
Last ___________________________________________ Female □ Male □
Address ____________________________________________
City _____________________________________ State _____ Zip _______
Phone ____________________________________________
E-mail ____________________________________________

CLASS CONFIRMATION MATERIALS (Please select one.)
☐ Please e-mail my class confirmation.
☐ Please send my class confirmation via the Post Office.

REGISTRATION INFORMATION

<table>
<thead>
<tr>
<th>Class #</th>
<th>Class Title</th>
<th>Material &amp; Shop Fees</th>
<th>Class Fee</th>
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Add Materials/Shop Fees Subtotal $____________
Early Arrival $40 (if available) (Friends Members: $35) $____________
I want to join Friends or renew my membership (see pg. 45) $____________
I want to make a tax-deductible contribution $____________
Total $____________

Amount Enclosed (minimum deposit $300) $____________
(If you are only making a partial payment, the balance is due three weeks prior to class.)

CLASS FEE (per person) (select one)
☐ $1045 Dormitory room w/ shared bath
☐ $1145 Two-person room w/ private bath
☐ $1705 Single-person room w/ private bath (limited availability)
☐ $615 Commuter (limited availability)

PAYMENT

Discover, MasterCard or Visa Number
______________________________
Expiration Date
______________________________
3-digit CVC #

Please make check payable to:
The Clearing  ■  P.O. Box 65  ■  Ellison Bay, WI 54210
920-854-4088
www.theclearing.org