WORKSHOP APPLICATION

NAME:			vv OT tite		APPLICA	11014		
(please print)								
Phone No:								
Address:								
E mail address			<u> </u>					
Workshop 1 Title & N	lo.							
Tutor								
Workshop Date								
Cost								
If there is a choice of workshop, please in								
Workshop 2 Title & N	lo.							
Tutor								
Workshop Date								
Cost								
If there is a choice of kit/pattern for the workshop, please indicate your choice								
Please send this	complete	ed form tog	gether wit	h a STA	MPED, SE	LF-ADDRESS	SED ENVELOP	E to:
The Workshop Re The Embroiderers PO Box 85 APPLECROSS W You will be asked to Receipt & list of requ	s' Guild o /A 6953 sign a co sirements	pyright Agre are sent 2 v	eement For		workshop			
PAYMENT DETAILS						Polance of Polymout		
Full Dayment	_			Dame	:+ ¢20	a elca h a n	Balance of Day	
Full Payment				Depo	osit of \$20 pe	r workshop	Balance of Pay	ment
Full Payment Amount	\$			Depo	osit of \$20 pe	r workshop	Balance of Pay	yment
	\$	e four wee	ks before	\$	osit of \$20 pe	r workshop		/ment
Amount	\$ t be mad		ks before	\$	osit of \$20 pe	r workshop		ment
Amount Full payment mus	\$ t be mad			\$	Cheque	r workshop		/ment
Amount Full payment must Payment enclosed: (\$ t be mad	Direct Please and we		\$ class.			\$	
Amount Full payment must Payment enclosed: (Credit Card	\$ please tic	Direct W Please and we are on	Debit e ensure yo orkshop nu bank detai	\$ class.	Cheque		\$	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec	\$ please tic	Direct Please and we are on	Debit e ensure yo orkshop nu bank detai	\$ class.	Cheque rs' Guild of W	'A (Inc)	\$ Money Order	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec	\$ t be mad please tic	Direct Please and we are on ade payable ER: EMBR	Debit e ensure yo orkshop nu bank detai to: The En	sur name umber ils	Cheque rs' Guild of W	/A (Inc)	\$ Money Order	
Amount Full payment must Payment enclosed: (Credit Card Please complete second CHEQUES: Showner BANK TR	t be mad please tic tion below ould be ma	Direct Please and we are on ade payable ER: EMBR	Debit e ensure yo orkshop nu bank detai to: The En	sur name umber ils	Cheque rs' Guild of W OF WA. COM	/A (Inc)	\$ Money Order	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec CHEQUES: Sho NET BANK TF BSB: 066 102 ACC#	t be mad please tic tion below ould be ma	Direct Please and we are on ade payable ER: EMBR Date T	Debit e ensure yo orkshop nu bank detai to: The En	sur name umber ils	Cheque rs' Guild of W OF WA. COM	/A (Inc)	\$ Money Order	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec CHEQUES: Sho NET BANK TR BSB: 066 102 ACC# CREDIT CARE	t be mad please tic tion below auld be mad RANSF 0090 259	Direct Please and we are on ade payable ER: EMBR Date T	Debit e ensure yo orkshop nu bank detai to: The En	sur name imber ils	Cheque rs' Guild of W OF WA. COM	/A (Inc) MONWEALTH B.	\$ Money Order	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec CHEQUES: Sho NET BANK TF BSB: 066 102 ACC# CREDIT CARE	t be mad please tic dion below and be made and be made	Direct Please and we are on ade payable ER: EMBR Date T	Debit e ensure yourkshop nubank detail to: The Enternation of the company of the	sur name imber ils	Cheque rs' Guild of W OF WA. COM	/A (Inc) MONWEALTH B.	Money Order ANK, BOORAGOO	
Amount Full payment must Payment enclosed: (Credit Card Please complete sec CHEQUES: Sho NET BANK TF BSB: 066 102 ACC# CREDIT CARE	t be mad please tic dion below RANSF 0090 259	Direct Please and we are on ade payable ER: EMBR Date T	Debit e ensure yourkshop nubank detail to: The Enternation of the company of the	sur name amber ils By GUILD (Comments):	Cheque rs' Guild of W OF WA. COM	/A (Inc) MONWEALTH BA	Money Order ANK, BOORAGOO	

(Office Use Only)

Registration No. Receipt No.