

# Registration Form

Adult & Children's Garden Programs



Space is limited and many classes fill up quickly. To secure a spot in a Seattle Tilth's classes please mail, fax or bring in a completed registration form with tuition. Checks should be made payable to Seattle Tilth.

Name (parent/guardian) \_\_\_\_\_ Today's Date \_\_\_/\_\_\_/\_\_\_

Child's name (kids classes only) \_\_\_\_\_ M/F

Child's Date of Birth \_\_\_/\_\_\_/\_\_\_

Child's age on June 1, 2008 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other/cell phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Class or Workshop Title	Date(s)	Class Tuition
		\$
		\$
		\$
		\$
		\$
		\$
<b>Annual Tilth Household / Family Membership (\$35)</b> <i>New</i> _____ <i>Renewing</i> _____    \$ _____ <i>I'm adding a donation to support Seattle Tilth</i> \$ _____		
<b>Total Amount Enclosed (check or credit card) \$ _____</b>		
<b>Credit Card Information</b> Name (as it appears on card): _____		
<input type="radio"/> Visa <input type="radio"/> MasterCard		Total Amount to be Charged:
Credit Card #: _____		Expiration Date:    /    /
Signature: _____		

## Seattle Tilth Cancellation Policy

To change your registration, please notify Tilth staff by phone (206) 633-5045 x2 two weeks prior to the scheduled class. Your full class fee can be applied to an alternate class if one is available or your tuition minus a \$20 registration fee can be refunded

Return Registration form & Payment to:

### Seattle Tilth Association

4649 Sunnyside Ave N, Room 120

Seattle, WA 98103

Fax: 206-633-0450

Questions: 206-633-5045 x2