JAMESTOWN ARTS CENTER

WINTER 2011

REGISTRATION FORM

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

E-mail _____

Parent's Name (if student under 18) _____

Student's Age (if under 18) _____

COURSE TITLE	DATES	TUITION & MATERIALS

JAC Membership _____

$20 Seniors/Students
$25 Individual
$40 Family
$100 Donor
$250 Sustaining
$500 Patron
$1,000 Benefactor

Less 10% for Members _____
(Membership is not required)

TOTAL Payment _____

Please make check payable to: Jamestown Arts Center
P.O. Box 97
Jamestown, RI 02835