

THE CONCORD POETRY CENTER

CLASS ENROLLMENT FORM

NAME _____
(PLEASE PRINT)

E-MAIL ADDRESS _____

TELEPHONE NUMBER _____

STREET ADDRESS _____
(PLEASE PRINT)

PLEASE ENROLL ME FOR THE FOLLOWING CLASSES

CLASS NAME	DATE(S)	TIME(S)	TUITION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
NOTES: CPC members deduct 20% discount on all class tuitions. If you are not already a member you can become a Regular Member for one year by just adding in the \$50 membership fee after taking your 20% deduction at right.	NON-MEMBER TOTAL		_____
	Subtract 20% to get CURRENT MEMBER TOTAL (add to become a new member)		_____
			\$ 50
	NEW MEMBER TOTAL		_____

I enclose a check for the indicated TOTAL made out to Concord Poetry Center and will mail to: Concord Poetry Center, Emerson Umbrella Center for the Arts, 40 Stow Street, Concord MA 01742

OR -----

Please use

Visa

Mastercard

Number _____ Expires _____

Name of cardholder if not yourself (please print)

OR ---- you can call 978-371-0820 and apply by phone, or FAX this application to 978-287-5366.