



CLASS BOOKING FORM

NAME:

ADDRESS:

TOWN:

POST CODE:

PHONE:

EMAIL:

List the classes or workshops that you would like to attend.

Please include dates:

I ENCLOSE A CHEQUE FOR:

(made payable to Ink Spot Press)

which represents payment in **full/deposit** (delete where applicable)

Phone to check availability of places then fill in this section and return to the address below with your payment, or pay over the phone with a card.

Signed:

Date:

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