

# Mississippi Art Colony

## Student Attendance/Registration Form

**Fall Session 2011**  
**Workshop Dates September 27<sup>th</sup> – October 2, 2011**

1st workshop Yes \_\_\_\_\_ NO \_\_\_\_\_ Attending from \_\_\_\_\_ to \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone : \_\_\_\_\_

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

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

Roommate request \_\_\_\_\_

Person to contact in case of emergency \_\_\_\_\_

Relation \_\_\_\_\_ Phone Number \_\_\_\_\_

***Please print ALL information, fill out the above portion only and mail form with your deposit to Byron Myrick 465 Rainey Rd., Moselle MS 39459. If registering for mailing list only and not for workshop attendance, your fee is \$20.00 annually. If you are registering for workshop attendance, this fee is waived and you are automatically on mailing list. This Membership Fee is to help defray mailing and printing expenses and your support is appreciated. Please note: Name are NOT removed from mailing list unless mail outs are returned by the USPS with no forwarding address.***

Check all that apply	Fees	Mississippi Artist	Out of State Artist	Total
	Workshop	\$125.00	\$175.00	\$
	Camp Fee DBL Occupancy	\$225.00	\$225.00	\$
	Camp Fee Simi-Private	\$250.00	\$250.00	\$
	Camp Fee Private Room	\$275.00	\$275.00	\$
	Deposit Amount	\$	\$	\$
	Over Night Guest @ \$50.00 per night # of nights _____	\$	\$	\$
	Balance Due At Check-In	\$	\$	\$

**For Office Use Only**

Check Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

Amount due to Camp Jacobs - \$45/night x \_\_\_\_\_ nights + \$ \_\_\_\_\_