

## Registration for Hall's Atlanta Floral Design School 2013 season

Please	list	the	dates	you	wish	to	attend:
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Name: Last	First	Middle initial/Maiden					
Street Name and Numb	er						
City		State	Zip				
() Home Telephone		() Cell / Business Telephor	 ne				
<u>( )</u>		Contract Name					
Emergency Telephone		Contact Name Gender <u>M</u>	/ F				
E-mail Address Briefly describe your pr	evious floral experience, if any:						
Referred By:							
Signature		Date					
Registration for Primar ( 3 week-34 hours)	y/Professional Course	Registration for single- (one day-6 hour classes					
Tuition \$	1,750.00	Tuition \$	240.00				
Retainer \$ (Due at reg	250.00	Retainer \$ (Due at regis	100.00 tration)				
retainer is non- refunda		• •	retainer is non- refundable				
Balance Due \$	1,500.00						
	irst class)		t class)				
	_						
Social Security Number * (only if paying by check)			e of Birth nly if paying by check)				
(only if paying by check)		*(0	my n paying by check)				

\*Checks should be made payable to Hall's Atlanta Wholesale Florist. Credit card, please contact Halls Accounting or Sales Staff