



CLASS Registration Form

Students will be enrolled on a first come, first serve basis. Please copy and prepare a separate application for each student.

Date: _____

Class (s) _____

Select a date: _____

Student's Name: _____ Male () Female ()

(Complete if Students is under 18) Mother's Name: _____ Father's Name _____

Address: _____ Race _____

City: _____ State: _____ Zip _____ E-Mail _____

Phone: Home: _____ Work: _____ Cell: _____

Please make check payable to "Greer Cultural Arts Council"

Total Amount \$ _____ Check # _____

Return to: Greer Cultural Arts Council Call 848-5383 For More Information!
226 Oakland Avenue
Greer, SC 9650

Fee Schedule = Full refund is furnished if class is cancelled by GCAC. The Council reserves the right to cancel an activity if there is insufficient enrollment 48 hours prior to class starting.



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