

PLEASE PRINT CLEARLY IN BLACK INK.

PERSONAL INFORMATION

If you know your ESS Number, enter it here: _____

Name _____

Address _____

City _____ State _____ ZIP+4 code _____

Country _____

Phone: Day (_____) _____ Evening (_____) _____

FAX (_____) _____ Cell (_____) _____

E-mail address _____

Would you like to be a host/hostess for your workshop? Yes No

Roommate Name(s) _____

Single Room? Yes No

Meals: Regular Vegetarian Vegan Food Restriction? Medical Religious

Describe _____

Disability, please explain _____

Bernina sewing machine rental? Yes No If Yes, add \$100.00

PAYMENT by check or international money order

\$300.00 Deposit paid Other amount : \$ _____

Full tuition paid - Amount : \$ _____

Check or Money Order # _____

Check Enclosed Check in mail to reserve (*within 10 days, please.*)

2020 Empty Spools Seminars Registration Form

This is my FIRST time attending Empty Spools Seminars.

The total number of sessions I want to attend is: _____

Please indicate your first, second and third choice of INSTRUCTOR for each session you plan to attend.

SESSION I: February 23 - 28, 2020

1st choice _____

2nd choice _____

3rd choice _____

SESSION IV: April 19 - 24, 2020

1st choice _____

2nd choice _____

3rd choice _____

SESSION II: March 15 - 20, 2020

1st choice _____

2nd choice _____

3rd choice _____

SESSION V: April 24 - 29, 2020

1st choice _____

2nd choice _____

3rd choice _____

SESSION III: March 20 - 25, 2020

1st choice _____

2nd choice _____

3rd choice _____

For additional information call:

(707) 864-1170

emptyspoolsseminars.com

I have read and agree to the terms, conditions and cancellation schedules included in the Empty Spools Seminars class catalog and/or website and agree to indemnify, hold harmless and make no claim against Empty Spools Seminars, its owners, officers, employees, volunteers or contractors for any injury, loss or damage sustained by attendees.

Signature required _____ Date _____

Electronic signature accepted: _____

Submit your registration form by MAIL, FAX or E-MAIL ATTACHMENT

Allow 3 to 4 weeks for confirmation.

Registration can not be accepted without proper signature.



MAIL TO:

Empty Spools Seminars
5306 Springridge Court
Fairfield, CA 94534-4005



FAX:

(707) 864-1345



E-MAIL:

info@emptyspoolsseminars.com

2020 REGISTRATIONS WILL NOT BE ACCEPTED BEFORE 8:00 AM (Pacific Time), MONDAY, MAY 13, 2019