

Registration form

Name _____

Address _____

City/State/Zip _____

Hm. phone _____ Work/Cell phone _____

Contact phone # in case of cancellation _____

Workshop choice _____

Please enclose a check for \$50 made out to SVSTM to reserve your space in the workshop. This deposit is non-refundable.

Mail to: SVSTM, 215 Piccadilly Street, Edinburg, VA 22824

To register by phone, please call 540-984-9629 between 9 and 5, Mondays through Fridays. **Telephone registrations will only be valid with a credit card deposit.**

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