

# PRE-FALL REGISTRATION

SEPTEMBER 8 - OCTOBER 17, 2008



## FLORIDA ADDRESS

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Email \_\_\_\_\_  
**ALTERNATE ADDRESS**

Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_

New Student      Returning Student

## HOW DID YOU HEAR ABOUT US?

Direct Mail      Website      Radio      Newspaper      Friend

## COURSE SELECTIONS FOR PRE-FALL 2008

Course Num	Title	Instructor	Day/Time	Tuition

## MEMBERSHIP

### JOIN TODAY TO RECEIVE MEMBER PRICING

Youth \$35      Individual \$75      Family \$100  
Young Professional \$100      Benefactor \$500      President \$1000

Additional levels of membership are available. For details please visit [www.lighthousearts.org](http://www.lighthousearts.org)

Here is my additional donation to the

\$ \_\_\_\_\_

\$ \_\_\_\_\_

## PAYMENT

Total Due

Enclosed is a check made payable to the Lighthouse Center for the Arts

Please charge my:    Visa/Mstercard      American Express      Discover

Credit Card # \_\_\_\_\_ Exp. date \_\_\_\_\_

By signing this form, I acknowledge that I have read and understand the tuition and refund policies listed on this page. This agreement is a legally binding instrument when signed by registrant and

Signature \_\_\_\_\_ Date \_\_\_\_\_

To reserve your space, submit this form along with your payment:  
School of Art 395 Seabrook Road - Tequesta FL 33469

**Register By Phone**  
561-748-8737