

## Hamilton Calligraphy Guild Workshop Registration Form

Workshop Name \_\_\_\_\_

Preferred date (*if applicable*):  Friday only  Saturday only  Either is fine

Participant's Name \_\_\_\_\_

Contact Information (**email preferred**, or phone number) \_\_\_\_\_

Member / Non-member

Payment: Please forward payment, **cheques only**, payable to the Hamilton Calligraphy Guild to:

Jan Cegnar  
Workshop Chair, Hamilton Calligraphy Guild  
120 Christopher Drive  
Hamilton, ON L9B 1G8

**Please note:** If you do not receive confirmation of registration within two weeks of mailing, contact the Workshop Chair as your registration may not have been received.

Additional copies of the registration form are available from the Guild library at meetings or from the website at [www.hamiltoncalligraphyguild.com](http://www.hamiltoncalligraphyguild.com)

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