

Registration Form.... Arizona Watercolor Association Workshops...

When you are registering for an AWA Membership Workshop in 2009.....

please DO NOT SEND MONEY!

Just check the workshops you want to attend, send the form to BETTYE ABOUD at the address below. She will let you know if you are in the class or on the waiting list.

Approximately 30-45 days before the seminar you will receive a phone or e-mail call asking for payment. Wait list will be used in the order the forms were received. **BE SURE TO PROVIDE YOUR PHONE NUMBER SO WE CAN CALL YOU IF THERE IS A SPACE AT THE LAST MINUTE!**

SIGN UP FOR ONE OF OUR FANTASTIC WORKSHOPS

2009 AWA

MEMBERSHIP WORKSHOPS

COST: \$35 per workshop for AWA members
\$40 for Non-AWA Members.

LOCATION: Patio Room of the Church of the Beatitudes, 555 W. Glendale Ave (SW corner at 7th Ave.), Phoenix, AZ

All Workshops 9:00am to 3:00pm

___ Marilyn Schutzky -- **SOLD OUT/WAIT LIST**
March 14, 2009 Vibrant Watercolors

Questions about the membership workshops?
Call or e-mail Karen Riehm at ktrihmawa@cox.net 602-318-5387 cell
or Shirley Bennett at sbenn@cox.net 623-412-0522

2009 AWA

JUROR WORKSHOPS

COST: see each listing

LOCATION: North Phoenix Baptist Church - Room 100
All Workshops 9:00am to 4:00pm

___ April 7-10, 2009 Betsy Dillard Stroud
Exciting Abstract 4 Day Workshop \$200.00

___ April 11, 2009 Betsy Dillard Stroud
Exciting Abstract 1 Day Workshop \$50.00

Questions about the Juror Workshops?
Carol Bentley cre8v@cox.net, phone #480-664-9442
Co-Chair: Sue Hunter suehunter7@cox.net 480-991-1634

PLEASE NOTE NEW PROCESS: CENTRALIZED REGISTRATION FOR BOTH TYPES OF WORKSHOPS

Registration Form

Please mark your selections,
Complete and MAIL this form with your check,
made out to AWA (Please put AWA in the subject line) :>)

MAIL to our centralized registration:

DO **NOT** SEND MONEY NOW, UNLESS IT IS
less than 30-45 DAYS BEFORE THE CLASS.

CENTRALIZED REGISTRATION:

Bettye Aboud, AWA
2840 E. Sunnyside Dr.
Phoenix, AZ 85028
Phone: 602-971-7264
bettye1@cox.net

Name _____ Member: ___ Yes ___ No

Address _____

City _____ State _____ Zip _____

Phone (____) _____ EMAIL: _____

Amount Enclosed:\$ _____ Check Numbers: # _____

Refund Policy: The student is to find a replacement & arrange reimbursement from that person.
Ask Bettye about a waiting list. There is a \$10 service fee if you require a refund.