



# REGISTRATION FORM

## October 5th, 2019

### CWCD WORKSHOP

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_\_\_  
Email \_\_\_\_\_ Email \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_

Please include all names & addresses when registering. TY

#### Quantity

\_\_\_\_\_ X \$30.00/person Sat Workshop & Dance before 9/1/2019  
\_\_\_\_\_ X \$35.00/person Sat Workshop & Dance after 9/1/2019  
\_\_\_\_\_ X \$25.00/person Sat Workshop only  
\_\_\_\_\_ X \$10.00/person Sat Dance only

No Refunds after September 15th, 2019

Check here \_\_\_\_\_ if you would like a free CD

Make Checks Payable to: Central WI Country Dancers

Mail Check and Form to CWCD Treasurer:

Bonnie Beyreis, P.O. Box 144, Spencer, WI 54479