



Witherspoon Fine Art

Original Oil Paintings * S/N Limited Edition Fine Art Prints * Oil Painting Classes
 9760 Mayfair Street, Suite B, Englewood, CO 80112 USA * Tel: 303-588-0581
 E-mail: Kay@KayWitherspoon.com * Web Site: www.KayWitherspoon.com

CLASS REGISTRATION FORM

* The classroom size is 20 ft. x 40 ft. For the protection of all, some who have compromised health conditions or family members with compromised health conditions, two oversized electric hepa 13 air filters will be running during classes to filter and recirculate the air every 30 seconds. Social distancing and wearing a mask is required. Your signature below signifies your acceptance of these requirements and your agreement to submit to a forehead temperature scan when entering the classroom. [Scan or take a cell phone photo of this form and text to 303-588-0581 or send to \[kay@kaywitherspoon.com\]\(mailto:kay@kaywitherspoon.com\) prior to the first day of class. Thank You.](#)

Name: _____ Date: _____

*Are. you vaccinated against Covid-19? NO YES (*Please provide a copy of your vaccination card via scan or cell phone photo and text to kay@kaywitherspoon.com or 303-588-0581)

*What is your skill level? Beginner Intermediate Advanced/Professional

✓ Check the box to indicates your group preference.

<input type="checkbox"/> Group A - 1st and 3rd week of the month, starting June 1st, 2021, and every other week thereafter	<input type="checkbox"/> Group B - 2nd and 4th week of the month, starting June 8th, 2021, and every other week thereafter
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✓ Check the box that represents your class time preference.

Tues., 10am - 1pm. Thurs., 10am - 1pm. Thurs., 6pm - 9pm. Sat., 10am -1pm

	Item	Cost	Sub-Total	TOTAL DUE	
Your payment confirms your registration. New students are required to participate in a free orientation meeting with the instructor prior to the first class.	1 Month. (\$80.00)				
	Plus 2nd Class per month. (\$80.00)				
			Sub-total		
			x Two (2) Months		
			Plus Annual Material Fee. (\$40.00)		
			Sub-total		
			TOTAL AMOUNT DUE		

✓ Check One: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Cash <input type="checkbox"/> Check	Check # _____	Pymt. Rec'd. _____
Card # _____	Exp. Date _____	CBD # _____
Cardholder's Name _____	Date: _____	Zip Code _____

