

Bead Camp Registration
April 17-19, 2015

Name _____

Address _____ City, Zip _____

Phone (D) _____ (N) _____

E-mail address: _____

Food allergies or special diet (Gluten-free/vegetarian/vegan) _____

Overnight Package: \$200 *Registration opens 2/25/15.* \$ _____

(Fri. & Sat. night lodging, Sat. breakfast, lunch & dinner/Sun. brunch)

Double occupancy room
Roommate preference: _____

Single occupancy Room: Add \$20 \$ _____

Commuter Package: \$100 (all meals) *Registration opens 4/1/15* \$ _____

Optional Class(es): **Morning Session 9:30 – 12:30**

\$50 Kiln Enameling with Leslie Perrino \$ _____

\$30 Royal Ribbons with Anna Elizabeth Draeger \$ _____

Afternoon Session 1:30 – 4:30

\$50 Kiln Enameling with Leslie Perrino \$ _____

\$30 Tempting Triangles with Anna Elizabeth Draeger \$ _____

Total fee: \$ _____

Payment information

MC, Visa or Discover card # _____ Exp. date _____

Check enclosed Amount: \$ _____

As a consideration for being permitted to participate in activities sponsored by the DeKoven Center, and/or using equipment or property of said establishment, each such participant and user agrees to assume all liability for injury and/or damage resulting from such participation or use and further agrees to hold the DeKoven Center free and harmless on account of any act of omission, commission or negligence on the party of the DeKoven Center or any of their officers, agents, or employees.

SIGNATURE: _____

Please detach and mail this form with payment in full to:
The DeKoven Center, 600 - 21st St. Racine, WI 53403 attn.: Hannah Kind
hkind@dekovencenter.org (262) 633-6401 ext. 106 FAX (262) 898-1644

Registration or Facility Questions? Contact Hannah Kind at the DeKoven Center
hkind@dekovencenter.org or 262-633-6401x106

General Camp Questions? Contact Amanda or Tracy at Funky Hannah's
info@funkyhannahs.com 262-634-6088