

SANTA FE PHOTOGRAPHIC WORKSHOPS
P.O. Box 9916 • Santa Fe, NM 87504-5916
(505) 983-1400, ext. 11 • fax: (505) 989-8604

APPLICATION FORM

Name _____ Male Female Age _____

Mailing Address _____

City _____ State _____ Zip _____

First Phone Preference (_____) _____ Cell Day Evening

Second Phone Preference (_____) _____ Cell Day Evening

E-mail _____

How did you hear of our workshops? _____

Are you an Alumnus? Yes No Which workshop(s)? _____

Occupation _____ Employer _____

Is your employer sending you to this workshop? Yes No If so, employer's name: _____

Years in photography _____ Camera to be used: Film Digital Make and Model _____

Will you be bringing a laptop computer? Yes No

If you are taking a workshop between February 14-March 27, do you want on-campus accommodations? *(see page 55 for details)*

Yes \$300 \$370 \$440 \$535 \$600

No, I will find my own housing.

Would you like to share a room with a friend taking a workshop? No Yes Friend's name _____

Do you require vegetarian meals? Yes No Special dietary restrictions _____

Do you want breakfast for an additional \$55? Yes No

Shall we return your portfolio or store it for pick-up in Santa Fe? Return my portfolio (please include return postage) Store my portfolio

WORKSHOP TITLE & INSTRUCTOR	DATES	TUITION	LAB FEE	MODEL, MATERIALS & LOCATION FEE	MEALS <i>(\$195, see pg. 55)</i>	BREAKFAST <i>(\$55 if available)</i>	HOUSING <i>(if available)</i>	TOTAL

<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover Card <input type="checkbox"/> American Express Exp. Date: _____ Credit Card # _____ Verification code from card _____ Credit Card Billing Address <input type="checkbox"/> Same as above _____ _____ Signature _____ Date _____	Application Fee: \$45 <i>(required)</i>
	Credits
	Subtotal
	Tax 8.0625% <i>(required)</i>
	TOTAL DUE
	Less Deposit Enclosed