

2010 REGISTRATION FORM

Your deposit is required in order to reserve your space.

Your Name: _____
(Write your name as you wish it to be printed on your certificate & letter of recommendation.)

Mailing Address: _____

City/State/Zip: _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **E-mail:** _____

	COURSE NAME	Pymt Amt	COURSE DATE(S)	D / E
	Floristry 1 - Basic Design			
	Floristry 2 - Advanced Design*			
	Floristry 3 - Int'l Design Trends*			
	Floristry 4—Masters Class*			
	Wedding/Celebration Design*			
	Today's Tribute Designs*			
	Permanent Botanical Design*			
	Ceremony Decorations*			
	Potter's Bench Profits*			
	Corsages & Boutonnieres*			
	Bridal Bouquets*			
	Business Basics*			
	Holiday Design I, II, or III*			
	Hands-on-Wednesdays*			
	TOTAL ENCLOSED:	\$		

*** = Pre-requisite: Floristry 1 - Basic Design**

For Pre-registration, you may pay either the \$100.00 deposit or the full balance due.

-Make checks payable to: Institute of Floristry

Mail checks to: 2407 East Hennepin Avenue; Minneapolis, MN 55413

-We can take your course registration over the phone via Visa, MasterCard or Discover.

Call (612) 362-3133 or (800) 298-0495 x133

- Please mail me a map with driving directions.

I am working toward the Diploma of Floral Arts and Sciences.

Please send me hotel information.