

**ARTISANS AT THE DAHMEN BARN**  
**Registration for classes and workshops**

Name of class: \_\_\_\_\_ Date of class: \_\_\_\_\_

Participants:

Name	Age (Needed only if under 18 years of age)

**Cost:** \$ \_\_\_\_\_ X **Number of Attendees** \_\_\_\_\_ = **Total \$** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

***Make checks payable to Artisans at the Dahmen Barn***

**Please Help Us Monitor Our Marketing Efforts** - Please check all the ways you heard about this event:

- |  |   |
|--|---|
| <input type="checkbox"/> Dahmen Barn e-newsletter        | <input type="checkbox"/> Ad or article in newspaper, which newspaper: _____ |
| <input type="checkbox"/> Dahmen Barn website             | <input type="checkbox"/> Radio, which radio: _____                          |
| <input type="checkbox"/> Handout at the Barn             | <input type="checkbox"/> Word of mouth                                      |
| <input type="checkbox"/> Facebook                        | <input type="checkbox"/> Other: _____                                       |
| <input type="checkbox"/> Ad or article in the Inland 360 |   |

**VISA or Mastercard #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

Print name on card \_\_\_\_\_

3 digit security code on back \_\_\_\_\_ Billing address \_\_\_\_\_

Signature: \_\_\_\_\_

***Please mail to Artisans at the Dahmen Barn, attn: Class Registration***  
***P O Box 36, Uniontown WA 99179***  
***or drop off during open hours at The Shop at the Barn, Thurs - Sun 10-6***  
*Your registration will be confirmed by email or by regular mail if you include a SASE.*