

Adult Workshop Registration Form

Please print this form and send with payment to:

Montana Audubon Center, Attn: Registration, 7026 S. Billings Blvd., Billings, MT, 59101

First and Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email address (required for confirmation): _____

Please check one if appropriate:

- ☐ I am a Friend of the Audubon Center and am eligible for a program discount
☐ I am not a Friend of the Audubon Center, but would like to join today for \$50/family or \$30/Individual, and receive a discount on my registration fee and programs throughout the year!

Workshop/Class Title	Dates	Fee*
Individual Membership +\$30		
Family Membership +\$50		
TOTAL AMOUNT ENCLOSED		

**If you have been awarded a scholarship, please indicate the adjusted fee.*

Registrations are on a first-come, first-served basis and are confirmed when payment in full is received with this registration. Space will not be guaranteed without full payment. A confirmation email will be sent to you within a week of receipt of payment.

Program fee (minus \$25 administrative fee) is refundable only if a cancellation is made 10 days before the first day of a program. No refunds will be issued for cancellations made after this deadline. Membership dues are not program fees and are non-refundable.

Total Due _____ ** Amount Enclosed: \$_____ **Minimum \$20 charge for credit cards

- ☐ Check #: _____ (payable to MT Audubon)
☐ Credit Card: _____ Visa _____ MasterCard

Card # _____ Exp Date _____ Security Code _____

Name as it appears on card _____

Signature _____

For Office Use Only	Date R'cd	Entered onto roster	Confirmation Letter Sent	Scholarship Entered?	