

Registration Form for SWMF!!!!

Please return this form with payment to Jennifer Everhart at:
The Artisan House, LLC
930 Hillcrest Circle
Platteville, WI 53818
Fax: 608.348.4151
E: Jen@theartisanhouse.org

REGISTRATION DEADLINE JANUARY 12th, 2009

_____ I am registering for the event.
I have enclosed my check for \$25.00 payable to IIDA WI
***Registration at the door will be \$30.00. Therefore, to be considered
PRE_REGISTERED you must enclose your payment with registration.**

_____ I am unable to attend the event. I would like to be an event
contributor. I have enclosed my check payable to IIDA WI
in the amount of: \$ _____
***This is not a tax deductible donation.**

_____ I would like to take this opportunity to make a tax deductible
charitable contribution directly to the Susan Wohltz Memorial Fund.
I have enclosed my check payable to the IIDA Foundation in the
amount of: \$ _____
_____ I need a receipt please.

NAME _____

Date: _____

Email _____

MAILING AD-
DRESS _____

I would like to pay for my registration with my credit card!!

Credit Card # _____

Amount: _____

Signature _____