

29th ANNUAL GREEN MOUNTAIN RUG SCHOOL
June 4-13, 2010

TO REGISTER: Send **\$75** (*separate from tuition fee*), registration form, and self-addressed, stamped envelope to Green Mountain Rug School. Make check or money order payable to Green Mountain Rug School. For two or more sessions, only one registration fee is required.

FINAL PAYMENT IS DUE MAY 1, 2010. Please send full tuition fee.

Week: Double \$495; Single \$595; Commuter \$255.

Weekend: Double \$265, Single \$295; Commuter \$150.

CANCELLATION POLICY: If requested in writing prior to May 1, 2010, \$50 will be refunded. After May 15, no refund of registration or tuition fees will be given for any reason. The administration reserves the right to cancel any class that does not draw the minimum number of registrants. If a class is full, you will be placed on a waiting list and notified if any vacancies occur.

WELCOME LETTERS: Additional details, a map, and a final bill are mailed out beginning April 15, 2010. For this purpose, please include a self-addressed, stamped envelope with your registration form.

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Stephanie Ashworth-Krauss, 2838 County Road, Montpelier, VT 05602 • 802-223-1333

REGISTRATION FORM (please print)

Name _____ (What you prefer to be called)

Address _____ (New student or address change)

Phone Number: _____ E-mail: _____

Which Session(s)? Weekend 1 Week Weekend 2

Select one class per session. If registering for more than one session, list choices separately and attach to this form.

1st Choice of Class/Teacher: _____

2nd Choice of Class/Teacher: _____

Single **Double** **Commuter**

Early arrival date: _____ Extra night(s) – Specify Date(s) _____

I would like to room with _____

Please select a roommate for me. To help with that process, please answer the following:

Do you smoke? Yes No Do you snore? Yes No

Is there a medical reason that you should be assigned a room on the 1st floor? Yes No

Level: Beginner Intermediate Advanced Teacher

Dietary needs: Vegetarian Other: _____

Will your spouse or partner accompany you? Yes No

In case of emergency, please contact:

Name _____

Relationship _____ Phone _____

PAYMENT METHOD: Checks and credit cards accepted.

To pay your registration (or in full) by credit card, please fill out the following:

MasterCard Visa Account number _____

Verification code (on back of card) _____ Expiration date _____

Signature _____

Return this form with your registration fee of \$75 and a self-addressed, stamped envelope to the address listed above as soon as possible, as classes are filled on a first-come, first-served basis.