



St. Michaels Art League, Inc.  
P.O. Box 1215  
St. Michaels, MD 21663  
[www.stmichaelsartleague.org](http://www.stmichaelsartleague.org)

## SMAL Workshop Registration Form

**"How to Critique your own Paintings"**

**Walt Bartman**

**September 16th, 2010 9:30 am to 5:00 pm**

Bridge Restaurant, Tilghman Island, MD 21671

*This form is also posted on our website [www.stmichaelsartleague.org](http://www.stmichaelsartleague.org)*  
Send the completed form via U.S. Mail as soon as possible as registration will be on a first come basis. **The registration deadline is August 26<sup>th</sup>, 2010.**

I wish to attend the workshop. Details, including a materials list and directions will be sent to me after registration and payment confirmation. Class size is limited.

**\$70 members    \$105 non-members**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

*(We prefer to reach you by e-mail. Please print clearly).*

**SPECIAL NEEDS:** Please advise us of any special needs as soon as possible.

### **PAYMENT METHODS:**

1) Check: *(Please make checks payable to St. Michaels Art League, Inc. and mail with this form to the address below.*

2) Credit Card: **VISA or MasterCard** number \_\_\_\_\_

Expiration date: \_\_\_\_\_ *(Please do not email credit info, as we do not have a secure site)*

Signature of cardholder: \_\_\_\_\_

**Cancellation Policy:** A full refund will be sent if notice is received by **September 2, 2010.**  
After September 2<sup>nd</sup>, payment is forfeited if no replacement is found.

**Send completed form via US mail to:**

**Karen Miles**

**PO Box 375**

**Tilghman, MD 21671**

**410-886-9171**

**Kmiles2701@aol.com**