



Your name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Workshop title and date: \_\_\_\_\_

Are you a Burchfield Penney member? \_\_\_\_\_yes \_\_\_\_\_not-yet

Member's fee enclosed: \$ \_\_\_\_\_

Not-yet member's fee enclosed: \$ \_\_\_\_\_

Payment is a check: \$ \_\_\_\_\_

Check number: # \_\_\_\_\_

Payment is a credit card: \_\_\_\_\_

Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

- Master Card
- Visa
- Discover

Name on card: \_\_\_\_\_

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

Contact Kathy Gaye Shiroki for further information at: [shirokkg@buffalostate.edu](mailto:shirokkg@buffalostate.edu) or 716.878.3549

