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| C:\Users\pat\Desktop\URBANBRIDGES_LOGO.jpg  **CLASS REGISTRATION FORM** | |
| [www.urbanbridges.org](http://www.urbanbridges.org) | |
| **NAME** |  |
| **ADDRESS** |  |
| **ORGANIZATION** |  |
| **CONTACT PHONE NUMBER** |  |
| **EMAIL ADDRESS** |  |
| **CHILD’S NAME(S)**  **&**  **CHILD’S AGE** |  |
| **WHAT ARE YOUR MAIN**  **CONCERNS:** |  |
| **COST OF CLASS** | $240.00 (If you bring a friend, you’ll receive a $40.00 discount) |
| **Please circle one:**  CLASS (OR) SEMINAR | **HOW DO YOU WISH TO MAKE PAYMENT FOR THE CLASS?** |
| Credit Card/Debit Card | Check this box & go to our upcoming class page on our web site **(or)**  Call us at 503-493-9436 to pay by phone |
| Check | Please check this box & mail to: 13911 N.E. Klickitat Ct., Ptld., Or.  97230 (or) Pay the first day of class |
| Cash | Pay the first day of class |
| **IF APPLICABLE:**  If “SEMINAR”,  I’ll pay at the door | Seminar Date: |
| **CLASS NAME:** | |