

A Needs List will be sent on receipt

UCKLAND EMBROIDERERS' GUILD

PO Box 56 135 Dominion Road, Auckland 1446 <u>www.aeg.org.nz</u>

WORKSHOP REGISTRATION FORM

NAME:	PHONE:
Address:	GUILD:
Postcode	EMAIL
WORKSHOP (please enter title of workshop her	re)
	DUE ON REGISTRATION
A NEEDS LIST WILL BE SUPPLIED WITH RECEIPT	
Booking and Payment must be made one mone Booking are on a first come/first served basis. We reserve the right to cancel any class that d	·
	Amount Paid \$
Paid by Cheque	Paid by Internet Banking
Please post your cheque with this form to	Auckland Embroiderers Guild Inc ASB 12 3011 0760391
Auckland Embroiderers Guild Inc	Use Surname and workshop code as reference
PO Box 56 135	
Dominion Road Auckland 1446	
registration form complete	OFFICE USE ONLY
Stamped addressed envelope if printed	OFFICE USE ONLY
Needs List required Include Payment	REGISTRATION NO.
	RECEIPT NO.
Cheques made payable to Auckland Embroiderers' Guild (if applicable)	