



Registration form for classes at  
**Institute of Mosaic Art**

Please fill out this form and include it with your registration check. If you can not download or print this please include this info on your own paper.



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

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

\_\_\_\_\_

**Phone numbers:**

Day: \_\_\_\_\_ Eve: \_\_\_\_\_ Cell: \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Please print the name of the course(s), the date of course(s) and fee below:**

Class Name	Date of Class	Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Total: _____

**Are you a new or returning student?** \_\_\_\_\_

**Other courses taken at True Mosaics or Institute Of Mosaic Art :** \_\_\_\_\_

\_\_\_\_\_

**How did you hear about Institute Of Mosaic Art?** \_\_\_\_\_

**Send to:**

Institute of Mosaic Art  
3001 Chapman St.  
Oakland, Ca 94601

Please Make Checks Payable To: "Institute of Mosaic Art".  
Separate materials fees payable to instructor on the first day of class