



**Portsmouth Arts Guild**

P.O. BOX 463, 2679 EAST MAIN ROAD  
PORTSMOUTH, RI 02871

# REGISTRATION FORM

**PRINT AND RETURN WITH PAYMENT TO  
PAG WORKSHOPS, P. O. BOX 463, PORTSMOUTH, RI 02871**

**I would like to register for the following:**

\_\_\_\_\_

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

**Street** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Amount enclosed:** \$ \_\_\_\_\_

You will be notified following registration of what materials you need to bring to class. If your class has a materials fee, please pay that to instructor directly; don't include with your check. Refunds will be given up to one week prior to the start of class. No refunds if you withdraw a week or less before the start of class.

Return with payment to: PAG Workshops, P.O. Box 463 Portsmouth, RI 02871.

For any questions, please contact Wendy Berube, Registrar at  
[workshops@portsmoutharts.org](mailto:workshops@portsmoutharts.org)