



## Write Mondays Registration—High School Workshop

### Fiction—Grades 9-12

Saturday, May 19, 10 am-2 pm

Local 64, 5 State Street, Montpelier, VT

Tuition— \$25

Please make check payable to Deb Fleischman.

Mailing Address:

Deb Fleischman

24 North Street

Montpelier, VT 05602

Student Name \_\_\_\_\_

Student Grade \_\_\_\_\_

Middle/High/Home School \_\_\_\_\_

Student Email \_\_\_\_\_

Student Cell \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

Parent/Guardian Cell \_\_\_\_\_

Home Address \_\_\_\_\_

Student Allergies or Medical Conditions \_\_\_\_\_

Emergency Contact \_\_\_\_\_

How did you hear about class? \_\_\_\_\_

I hereby give \_\_\_\_\_ permission to take this class.

Student Name

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date