



Central Wisconsin Cultural Center

REGISTRATION FORM

One registration form per student.

Class/Workshop: _____

Date/s: _____

STUDENT'S NAME AND CONTACT INFORMATION

Please print legibly or type:

Student's Name:	
Address:	
City:	
State, Zip:	
Phone:	
Email:	
Age (check one):	<input type="checkbox"/> Adult, 18 or older <input type="checkbox"/> Junior, 17 or younger
How I learned about this class:	

PAYMENT METHOD

Check \$ _____ check # _____ | Cash \$ _____

Make check payable to CWCC; mail or deliver in person.

Deliver cash in person; do not mail.

Payment is due in full before or at the beginning of class.

REMIT PAYMENT AND REGISTRATION FORM TO

Central Wisconsin Cultural Center (CWCC)

320 W Grand Ave, Suite 104

Wisconsin Rapids, WI 54495

CANCELLATION AND REFUND POLICY

varies with each class. Please ask the Cultural Center for details.



Central Wisconsin Cultural Center
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