

Moab Arts & Recreation Center Class Registration Form

Class: _____

Participant Name: _____

Tuition: _____ Materials Fee: _____

Member Discount: _____ Total Due: _____

Applying for scholarship: Yes ___ No ___ Paid by: Check / Cash / Credit

Mailing
Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

Parent Signature (If under 18): _____ Date: _____

Print Name: _____

*If paying with credit or debit card please enter information below

<u>Credit Card Information</u>	
Credit Card Type: _____	Billing Zip Code: _____
Card Number: _____	Expiration: _____
Card Holder Signature: _____	Date: _____

*Please fill out completely, and return to the MARC 111 E. 100 N. Moab, UT or for
more information call us at 259-6272*