

# NEWSPACE CENTER FOR PHOTOGRAPHY

A NONPROFIT DEDICATED TO PROMOTING PHOTOGRAPHIC EDUCATION AND APPRECIATION

**MAIL** the completed form with your payment to:

Newspace Center for Photography  
c/o Classes & Workshops  
1632 se 10<sup>th</sup> ave.  
Portland, OR 97214

(please print clearly)

Name \_\_\_\_\_

Address \_\_\_\_\_

City State Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Email \_\_\_\_\_

**Please Sign me up for:**

| <b>Class &amp; Section #(if applicable)</b> | <b>Cost</b> |
|---|-------------|
|---|-------------|

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| _____ |  |
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| _____ |  |

+ \$10 Registration Fee

**Checks payable to:** Newspace

**Total:** \_\_\_\_\_

OR

VISA     MasterCard

Card # \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_    3 digit code on back of card \_\_\_\_\_

Signature \_\_\_\_\_

**Please review all registration and cancellation policies in our catalog or online.**