

EAST SIDE ART CENTER
Block Island Workshops

Workshop starting September 8 to September 15, 2014

Please clearly fill in the requested information below.

Name _____ Telephone: Day () _____ Evening () _____

Street _____ City _____ State _____ Zip _____

If you are sharing a room with another student, or sharing a room with a non-student, please fill out the next section. (see *Single and Double rooms available* section of brochure or web site.)

Name _____ Telephone: Day () _____ Evening () _____

Street _____ City _____ State _____ Zip _____

The balance due for the room and instruction is to be received in full by July 1 at ESAC.

Please specify room by its "floral" name on line below. (See web site diagram of floor plans.)

First Choice _____ Second Choice _____ Third Choice _____

Enclosed is a minimum non-refundable one-half Room deposit..... \$ _____

Enclosed is a minimum non-refundable one-half Tuition deposit..... \$ _____

_____ I am reserving a ROUND TRIP VEHICLE ticket
and enclosing \$ 80.40 (refundable before August)..... \$ _____

_____ I am *not* reserving a vehicle ticket

TOTAL ENCLOSED (check, money order or credit card)..... \$ _____

☐ Check made payable to Sunrise / ESAC

☐ VISA

Account Number:

☐ MASTERCARD

3-digit security code on back of card:

☐ DISCOVER

Expiration Date:

Name as on card _____ Signature _____

Send Application and payment to:

Sunrise / ESAC 26 Rochambeau Avenue Providence, RI 02906

We will confirm your enrollment in writing. If we are unable to fulfill your request, we will notify you of options available. If that proves unsatisfactory, your deposit will be refunded in full.