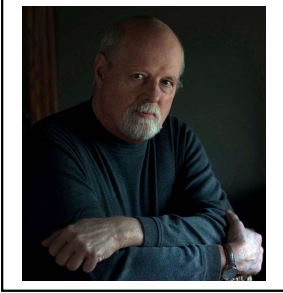


SOCIETY OF WEST-COAST ARTISTS
Art Workshop REGISTRATION FORM



WILLIAM SCHNEIDER

2-Day Painterly Portrait Workshop with Oil & Pastel

September 14-15, 2019

Intermediate – Advanced Students

Learn how to loosen up! Most artists admire the expressive, suggestive brushwork of masters like Nicolai Fechin, John Singer Sargent, and Anders Zorn. But understanding how they achieved those effects is another matter. In most cases, it's not what they put in, but rather what they chose to leave out.

DATES: September 14-15 2019, Saturday/Sunday 9:00 AM – 4:00 PM

LOCATION: SWA Art Center, 527 San Mateo Avenue, San Bruno

FEES: \$275 SWA Members \$330 non-SWA members \$295 non-SWA members joining SWA

REGISTRATION DEADLINE: Thursday, August 8, 2019

MATERIALS: A materials list will be sent to you when available.

CANCELLATIONS: Cancellations received at least 30 days prior to workshop start date will be refunded in full. Cancellations received less than 30 days prior to workshop start date cannot be refunded unless a substitute student can be found. The Workshop Organizer may have a waiting list for a substitute. In the event SWA cancels the workshop, registration fees will be refunded in full.

INDEMNITY CLAUSE: By signing the Registration Form below, I agree to accept full responsibility for any and all injuries, damages, or losses resulting from my voluntary participation in the activities of SWA Art Workshops, and to hold SWA, its licensors, staff, volunteers, and representatives forever harmless from any action, claim, or liability from same.

WORKSHOP ORGANIZER: John Barrows, johnbarrows@sbcglobal.net

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REGISTRATION FORM

WILLIAM SCHNEIDER 2 Day Painterly Portraits Workshop

September 14-15, 2019

Saturday-Sunday

9:00 AM – 4:00 PM

Student Name _____ Phone _____ Email _____

Address: _____ City _____ State _____ Zip _____

_____ \$275.00 SWA Members only

_____ \$75.00 deposit to hold my place in the workshop. **Balance due August 8, 2019**

_____ \$330.00 non-SWA Member

_____ \$295.00 non-SWA members joining SWA

Pay by check made payable to SOCIETY OF WEST-COAST ARTISTS **or** Credit Card (Visa or Mastercard)

Name on card: _____ Card # _____ Exp. Date _____

Card 3 Digit Code _____ Billing Address _____

Amount _____ Cardholder Signature _____

My signature below confirms my understanding and agreement with the above Registration, Indemnity and Cancellation policies:

Signature _____ **Date** _____

Mail Registration Form and Payment to: SWA, Attn: John Barrows, 527 San Mateo Avenue, San Bruno, CA 94066