2018 APPLICATION

NAME

ADDRESS

CITY / STATE / ZIP

TELEPHONE: DAY EVENING

E-MAIL

DATE OF BIRTH FEMALE MALE

OCCUPATION

EMERGENCY CONTACT PHONE

METHOD OF PAYMENT ☐ ENCLOSED ☐ VISA ☐ MC ☐ DISCOVER ☐ AMEX

CARD NUMBER

EXPIRATION DATE SECURITY CODE

SIGNATURE *(I understand the conditions for refunds)* DATE

ALUMNI ☐ YES ☐ NO

SIGNATURE *(I authorize the balance due to be charged to the above credit card one month before class begins)* DATE

WoodenBoat School

PO Box 78, 41 WoodenBoat Lane, Brooklin, Maine 04616
(207) 359-4651 • Fax: (207) 359-8920
www.woodenboat.com
Email: school@woodenboat.com

Please register by phone, mail, fax, or email.

Desired Courses	Date	Tuition

Tuition	
Accommodations *(see page 32)*	
Board *(see page 32)*	
Material Cost(s)	
TOTAL COSTS	
Deposit	
Balance Due	

■ **ACCOMMODATIONS DESIRED:**
While we make every effort to assign applicants their first choice in accommodations, due to space limitations we may need to assign a student to a shared room. (Please indicate your first and second choice.)

FIRST CHOICE SECOND CHOICE

■ **Please indicate the nature of any food allergies, disabilities, or special needs:**

■ **Please describe below any previous experience that relates to the course(s) you wish to attend. What do you expect to gain from the course, and how do you intend to use it?** *(Feel free to use additional paper.)*