



Registration Form
 Tinker Mountain Writers' Workshop
 Hollins University
 June 13-18, 2010
 www.hollins.edu/tmww

Hollins Use Only	
Date Deposit Received:	_____
Amount: _____	Processed: _____
Balance Received: _____	
Amount: _____	Processed: _____

Last Name _____ First Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Email Address _____

Workshop

Registration is first-come, first-served. Some workshops will fill quickly – please register early. Must be over 18 to attend.

Workshop: _____

Alternate Choice 1: _____

Alternate Choice 2: _____

Registration Fees

<u>Category</u>	<u>Registration/Deposit Amount</u>	<u>Amount Enclosed</u>
<input type="checkbox"/> Workshop	\$750/\$300 (balance due May 3, 2010)	\$ _____
<input type="checkbox"/> Lodging	\$200/\$100 (balance due May 3, 2010)	\$ _____
<input type="checkbox"/> Meal Plan	\$200/\$100 (balance due May 3, 2010)	\$ _____

Hollins Alumnae and participants from previous workshops receive a \$100 discount on registration.

Total Enclosed \$ _____

Hollins Alumnae – Year _____ Previous Participant – Year _____

Payment Information

Check # _____ MC Visa AMEX Discover
 (Checks payable to Hollins University)

Cardholder Name _____

Card Number _____ Exp. Date _____

Signature _____ Billing address for credit card, if different from above: _____

Refund Policy: Deposits are non-refundable after April 1, 2010. All requests for refunds must be made in writing. Payment in full is due May 3, 2010. Registrations received after May 3, 2010 must be paid in full. No refunds will be given to those who must leave the conference early.

Return Form

TMWW/Hollins University
 Christine Powell
 PO Box 9552
 Roanoke VA 24020-1552
 Phone: 540-362-6225 Fax: 540-561-2325



*(Faxed registrations must include credit card information. Payment **must be** received with registration.)*