

COMA WORKSHOP REGISTRATION FORM

Workshop/Instructor: _____
Date _____ Fee _____

To register for a workshop, you must be a member in good standing. Make checks payable to COMA, include the title of the workshop on the memo line and mail to COMA, P.O. Box 38064, Colorado Springs, CO 80937-8064

Colorado Metalsmithing Association cancellation policy is as follows:
Cancellation 60 days prior to the class/workshop - full refund
Cancellation 30 days prior to the class/workshop - 50% refund
No other refunds will be issued unless class/workshop has a waiting list and the space can be filled.

Your registration form must be accompanied by payment for the workshop. The workshop chairperson will not hold a space by telephone or email request.

For questions please contact: comaforum1@comcast.net or call 719-271-1427

Liability Release

As part of the consideration, in addition to the registration fee, paid to COMA for arranging or hosting the course for which I have registered, I hereby release COMA, the course instructor, COMA's Board of Directors, its members, as well as any person or entity on whose property this course may be given, from any and all liability for personal injury or property damage that I may suffer or sustain due to negligence or otherwise in connection with any such course, whether by ingress or egress, attendance or otherwise.

Name _____ Date _____
Address _____
City _____ Zip _____
Phone _____
Email _____

Credit card number _____ Exp Date _____
Check # _____ Signature _____

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