



## Reservation Form

Class	Date	Time	Cost
<b>Total</b>			

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*Workshops need to be paid in advance.*

**Bead Fiesta The Shoppe accepts:**

**Checks:** Make payable to: ***Bead Fiesta The Shoppe***    Check enclosed: \$ \_\_\_\_\_

**Credit Card:**

Total: \$ \_\_\_\_\_

Visa     MasterCard     American Express     Discover

Card Number: \_\_\_\_\_

Card Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Expiration Date : \_\_\_\_\_

1. **Mail Application to:** Bev McCarthy, Bead Fiesta The Shoppe, Cider Mill Building,  
15 Waushacum Ave. Sterling, MA 01564 or
2. **Drop form off** at the Shoppe in Sterling.

*Thanks and enjoy your class!*