

ARROWMONT

school of arts and crafts

Windgate University Fellows Registration Form East Tennessee State University

Name

Date

Present Address

City / State / Zip

Cell Phone

Email

(To check a box, left click on the box twice and change it from not checked to checked)

Are you over 18? Yes No Male Female

Date of Birth: _____

Have you ever attended Arrowmont? Yes When? _____ No

Have you ever received any financial assistance to attend Arrowmont in the past?

Yes When? _____ No

Class Choices:

Choice 1: Date _____ Instructor: _____

Choice 2: Date _____ Instructor: _____

Choice 3: Date _____ Instructor: _____

Choice 4: Date _____ Instructor: _____

Housing Included: Single w/ private bath _____