



Fall/Winter 2008
National Class Program
Payment Receipt

Please enclose this form with your check and return to DeNami Design, P.O. Box 5617 – Kent, WA 98064

Store Name _____ Contact _____

<u>Date</u>	<u>Class</u>	<u># of Students</u>	<u>Fee</u>	
_____	Blitz 1	_____	\$35/student	= _____
_____	Blitz 2	_____	\$35/student	= _____
_____	Cool Concepts	_____	\$30/student	= _____
_____	Pop Up Cards	_____	\$35/student	= _____
_____	Demonstrating (# of hours)	_____	\$50/hour	= _____

TOTAL (less deposit \$100 per class) = _____

Please sign and date below

Store Owner _____ Instructor _____

PAYMENT: <input type="checkbox"/> Check enclosed <input type="checkbox"/> Visa/Mastercard: _____ - _____ - _____ - _____ exp___ / ___
--



Fall/Winter 2008
National Class Program
Payment Receipt

Please enclose this form with your check and return to DeNami Design, P.O. Box 5617 – Kent, WA 98064

Store Name _____ Contact _____

<u>Date</u>	<u>Class</u>	<u># of Students</u>	<u>Fee</u>	
_____	Blitz 1	_____	\$35/student	= _____
_____	Blitz 2	_____	\$35/student	= _____
_____	Cool Concepts	_____	\$30/student	= _____
_____	Pop Up Cards	_____	\$35/student	= _____
_____	Demonstrating (# of hours)	_____	\$50/hour	= _____

TOTAL (less deposit \$100 per class) = _____

Please sign and date below

Store Owner _____ Instructor _____

PAYMENT: <input type="checkbox"/> Check enclosed <input type="checkbox"/> Visa/Mastercard: _____ - _____ - _____ - _____ exp___ / ___
--