

**GALLANT/PATTERSON WORKSHOPS  
"Photography and Visual Design"**

**APPLICATION FORM (2019)**

Name.....  
Address..... Postal Code.....  
Tel: Home..... Work.....  
email.....  
Name I usually go by.....  
Male\_\_\_\_\_ Female\_\_\_\_\_

**WORKSHOP DATES:**

1<sup>st</sup> choice 2<sup>nd</sup> choice

**Lunenburg, NS (André)**

May 19 – 24 (depart May 25) .....  
October 20 – 25 (depart October 26) .....

**St. Martins, NB (André and Freeman)**

August 25 – 31 (depart September 1) .....  
September 22 – 28 (depart September 29) .....  
October 6 – 12 (depart October 13) .....

**DEPOSIT:**

VISA/\_\_\_\_\_ Exp.\_\_\_\_\_  
Mastercard

Email Money Transfer \_\_\_\_\_ (send \$400. deposit to [freepatt@nbnet.nb.ca](mailto:freepatt@nbnet.nb.ca) after January 1<sup>st</sup>)

**GUESTS:**

I will be accompanied by.....

**WAIVER OF LIABILITY**

"I expressly acknowledge and agree that Shampers's Cove Limited or any of their directors, officers, employees or agents shall not be liable for any claims or damages arising from personal injury sustained, nor for any loss or theft of personal property, however caused."

Date.....

Signed.....

**EXTREMELY IMPORTANT!!**

**Special dietary requirements.**

**(If your dietary restrictions require the purchase of specialty items, an additional fee may be charged).**

Yes.....No.....

.....  
.....  
.....  
.....

Complete and **sign** this form and return to:

**SHAMPERS COVE LIMITED  
3487 ROUTE 845  
LONG REACH, NB  
CANADA E5S 1X4**

**e-mail [freepatt@nbnet.nb.ca](mailto:freepatt@nbnet.nb.ca)  
Phone 506-763-2189  
Fax 506-763-2035**