

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

**APPLICATION FORM (2020)**

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 31 – June 5 (depart June 6) ..... ..

**St. Martins, NB (André and Freeman)**  
August 23 – 29 (depart August 30) ..... ..  
September 27 – October 3 (depart October 4) ..... ..  
October 11 - 17 (depart October 18) ..... ..

**DEPOSIT:**  
VISA/\_\_\_\_\_ Exp.\_\_\_\_\_  
Mastercard

Email Money Transfer \_\_\_\_\_ (send \$400. deposit to [freemanpatterson2@gmail.com](mailto:freemanpatterson2@gmail.com) after January 1<sup>st</sup>)

**GUESTS:**  
I will be accompanied by.....

**WAIVER OF LIABILITY**  
"I expressly acknowledge and agree that Shampers' 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 [freemanpatterson2@gmail.com](mailto:freemanpatterson2@gmail.com)  
Phone 506-763-2189  
Fax 506-763-2035**