Registrations using the form below will be accepted in person or by mail. Please make checks payable to the "Button Box."

BUTTON BOX CLASS REGISTRATION FORM

NAME:_____PHONE: (_____)_____(day)/(_____)_____(evening)

ADDRESS: _____
STREET CITY/STATE ZIP CODE

E-MAIL ADDRESS:_____ **PLEASE PRINT CLEARLY**

CLASS	INSTRUCTOR	DAY	TIME	FEE