



Mendocino Coast Writers Conference

2010 REGISTRATION FORM

ONE PARTICIPANT PER FORM PLEASE

ENROLLMENT IS LIMITED. REGISTER NOW.

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Check if OK to share your email with your workshop:

How did you learn about MCWC? _____

Rank your top two choices (a & b) for:

Morning Workshop: (Thurs., Fri. & Sat.)

a. _____

b. _____

Afternoon Lecture/Discussion Sessions

Thursday

a. _____

b. _____

Friday

a. _____

b. _____

Saturday

a. _____

b. _____

Do you plan to participate in a Sunday field trip? Yes No

Sign me up for _____ Professional Consultations (Add \$60 for each 20 minute consultation)

I wish to consult with: _____

I wish to purchase _____ Partner Packages.

Tuition for the conference costs \$495 before June 15, 2010 and \$545 after this date.

Refund Policy: Requests prior to July 9, 2010: Fee Paid less \$50.

Requests received after July 9, 2010: No Refunds.

Visit our website for information on the discounts and scholarships available and the Partner Package Fee.

Registration Fee Enclosed: \$ _____

Consultation Fee Enclosed: \$ _____

Partner Package Fee Enclosed: \$ _____

Total Amount Enclosed: \$ _____

Please enclose a check for the total or complete the credit card information below

Payment by: Visa/Mastercard (Circle One)

Card Number: _____

Exp. Date: _____

Signature: _____

Send this completed form to:

Mendocino Coast Writers Conference

P.O. Box 2087

Fort Bragg, CA 95437

Applications will be processed in order of the postmark date.

NOTE: Applicants for the Master Class must also enclose a MS sample (as specified) and a separate check for \$100.