

The Niagara Pumphouse Art Centre  
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 Web site: [www.niagarapumphouse.ca](http://www.niagarapumphouse.ca)

**REGISTER FOR CLASSES & WORKSHOPS**

Name.....  
 Address..... P.O. Box .....  
 City..... Postal Code.....  
 Telephone..... E-mail.....

Course Number	Course /Workshop Name	Course Fee

**Membership**

Single membership    \$35                    I have been a member previously \_\_\_\_\_  
 Family membership    \$50                    This is a new membership \_\_\_\_\_  
 Life-time membership    \$200  
 Membership fees \_\_\_\_\_

**Donation**

Donation amount \_\_\_\_\_

**TOTAL** \_\_\_\_\_

Cash                    Cheque                    Visa                    Mastercard                    By telephone

Credit Card Number \_\_\_\_\_  
 Card expiry \_\_\_\_\_  
 Card holder name as appears on card \_\_\_\_\_  
 For family membership, please list family members \_\_\_\_\_  
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