

HARFORD ARTISTS' ASSOCIATION INSTRUCTOR'S REQUEST FOR WORKSHOP/PROGRAM FORM

Instructor: _____

Title of Workshop: _____

Cost charged per student: _____

Date: _____ Beginning Time: _____ End Time: _____

Number of Students allowed: _____ Beginner Intermediate Advanced

Supplies Students need to bring: _____

Supplies Provided by Instructor: _____

Description: (What students can expect to get out of the class) _____

Please email a representative picture of the workshop to:

HAAProgramsDirector@artinharford.org & HAAGallery@artinharford.org