

OSPREY Photo Workshops & Tours Registration Form

Personal Information

* indicates required information)

* Your Name _____
* Street Address _____
* City _____
* State or Province _____
* Zip _____
Country _____
* Telephone (Home) _____
Telephone (Work) _____
* E-mail Address _____

Workshop Information

Title of Workshop _____
Date of Tour (month & year) _____

Room Type (if applicable)

Single I agree to pay the single supplement fee.
 Double If you have a preferred roommate, please list their name here _____

Deposits required:

(A tour is greater than 2 days. A workshop is a single day or weekend.)

- Tour deposit is 25% of tour cost.
- Workshop deposit is 50% of workshop cost.

Payment Information

To reserve your spot, please pay via check through the mail or pay via charge card over the phone:

Check. Amount enclosed: _____

(410) 679-2873

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