

**Manhattan Master Class with Christine Vachon:
February 1, 2014**

REGISTRATION FORM

CONTACT INFORMATION

Date: _____

Prefix (circle one): Mr., Ms., Mrs., Dr.

First Name: _____ MI: _____ Last Name: _____

Street Address: _____

PO Box: _____

City: _____ State: _____ Zip: _____

Date of Birth or last four digits of SS#: _____

Email address: _____

Home Telephone #:(_____)_____ Business Telephone #:_(_____)_____

Have you ever attended workshops at Stony Brook University, Manhattan or Southampton? No Yes, my SBU ID is: _____

REGISTRATION & PAYMENT INFORMATION

\$75* Preregistration with Discount/Preregistration Code: _____
**Deadline: Preregistration form must be RECEIVED by January 15, 2014*

\$125** Standard Registration
***Deadline: Standard registration form must be RECEIVED by January 27, 2014.*

Enclosed please find:

a check for my registration fee payable to "Stony Brook University," check number: _____

a credit card number will be provided on line through the Stony Brook University System, SOLAR. I understand that I will be contacted by Stony Brook University with directions on how to log into the System and that I must be paid in full by January 28 to attend the session.

RETURN TO:

Email: SouthamptonArts@stonybrook.edu

Fax: 631-632-2576.

Snail Mail:

MFA in Theatre: Film Track
Stony Brook Southampton
239 Montauk Highway
Southampton, NY 11968