

Accent Sewing

Class Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (AM): _____ Phone (PM): _____

Email: _____

Visa/MC/Bernina #: _____ Exp Date: _____

Signature: _____ Verification Code: _____ (3 digit code on back of card)

Class Name	Class Date	Class Fee
1.		
2.		
3.		
4.		
5.		
Class Fee Total:		

Mail or Fax Form To:

Accent Sewing
4410 Hwy 17 Bypass, Unit B7
Murrells Inlet, SC 29576

Fax: 843-357-8221

Phone: 843-357-3228 ~ Web: www.accentsewing.com ~ Email: accentsewing@aol.com