

Class Registration



Name _____
Address _____

Phone _____
Email _____
Class Name: _____

Please use this form to register for the class(es) of your choice! A cheque for 50% of the class fee will hold your spot.

Start: Class start date: _____
Generally, do you prefer afternoon or evening session? Please check your preference. Afternoon _____ Evening _____

Where: Red Red Bobbin Studio. Call for directions or Google maps for our location (address below).

Fee: Class Fee _____
Kit Fee _____ (if applicable) includes main panel fabric, fat quarters, strips or customer's choice fabric to complete the class project. Backing, batting and thread are participant's responsibility, all of which are available for purchase here for your convenience.

Class Size: Limited to four participants, so register early. A 50% deposit will hold your spot. Remember to reserve your kit if applicable.

Registration deposit _____ Kit deposit _____
Signature _____ Date _____

Red Red Bobbin
Custom Quilts and Quilting Services
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By appointment : 519-770-3580