



Class/Symposia Registration Form

Name _____ GBBG Member? Yes No
 Name 2 _____ GBBG Member? Yes No
 Address _____
 City _____ State _____ Zip _____
 Phone _____ E-mail _____

<u>Class Name</u>	<u>Date</u>	<u>Lunch Choice</u> <small>(Symposia Only)</small>	<u>Class Cost</u>	<u>Subtotal</u>
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____
			Total Classes	\$ _____

<u>Membership</u> (Basic \$40, Individual \$30)	<u>Item Cost</u>	<u>Subtotal</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
		Total Other

Grand Total \$ _____

- Check or cash. Please make checks payable to GBBG.
 Visa or MasterCard. _____ - _____ - _____ - _____ Exp: ____/____

Name on card: _____ Signature: _____

Send in your form and check to: GBBG Class Registration, 2600 Larsen Road, Green Bay WI 54303

Questions? Please call us: (920) 490-9457