



## Austin Application

First Name		Last Name	
Address			City, ST Zip
Cell:	Daytime Phone:	Fax:	
Email:			

**I have completed the following post-secondary education (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> Have not attended college         | <input type="checkbox"/> Associate Degree  |
| <input type="checkbox"/> Some College (___ Years)          | <input type="checkbox"/> Bachelor's Degree |
| <input type="checkbox"/> Certification Program             | <input type="checkbox"/> Master's Degree   |
| <input type="checkbox"/> Private career school Certificate | <input type="checkbox"/> Other             |

If Other, please describe:

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**Have you ever worked in the floral industry?**  Yes  No

If Yes, please describe:

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**I am interested in taking Basic Floral Design classes for the following reason (Choose one):**

- Career Preparation
- Personal development/self-improvement

I certify that all statements on the application are true.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Registration

Name: \_\_\_\_\_

## September 15-18, 2014

Monday	Tuesday	Wednesday	Thursday
9:00 am – Noon <i>Basic Design</i>	8:30 am- Noon <i>Sympathy Design</i>	9:00 am- Noon <i>Basic Design</i>	8:30 am- Noon <i>Floral Management</i> <i>Care &amp; Handling of Cut Flowers and Foliage</i>
1:00 pm- 4:30 pm <i>Wedding Design</i>	1:00 pm- 4:30 pm <i>Sympathy Design</i>	1:00 pm- 4:30 pm <i>Wedding Design</i>	1:00 pm- 4:30 pm <i>Floral Management</i> <i>Care &amp; Handling of Cut Flowers and Foliage</i>

## September 22-25, 2014

Monday	Tuesday	Wednesday	Thursday
9:00 am – Noon <i>Basic Design</i>	8:30 am- Noon <i>Sympathy Design</i>	9:00 am- Noon <i>Basic Design</i>	8:30 am- Noon <i>Floral Management</i> <i>Care &amp; Handling of Cut Flowers and Foliage</i>
1:00 pm- 4:30 pm <i>Wedding Design</i>	1:00 pm- 4:30 pm <i>Sympathy Design</i>	1:00 pm- 4:30 pm <i>Wedding Design</i>	1:00 pm- 4:30 pm <i>Floral Management</i> <i>Care &amp; Handling of Cut Flowers and Foliage</i>

To register, please check next to the class(es) you would like to take:

Class Name and Description	TSFA Members	Other
<input type="checkbox"/> Basic Design* Class dates: September 15, 17, 22, 24 (9:00am)	\$275	\$315
<input type="checkbox"/> Wedding Design* Class dates: September 15, 17, 22, 24 (1:00pm)	\$300	\$345
<input type="checkbox"/> Sympathy Design* Class dates: September 16, 23 (all day)	\$300	\$345
<input type="checkbox"/> Floral Management, Care & Handling of Cut Flowers and Foliage* Class dates: September 18, 25 (all day)	\$275	\$315

\*Class includes tools that students can use in classroom

\$75 deposit is due for *each* class registration. The deposit will be refunded if cancellation notice is received five (5) business days before the start of classes.

I wish to pay by \_\_\_\_\_ Check \_\_\_\_ Credit Card

Please make checks payable to Texas State Florists' Association.

Credit Card Billing: \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ AmEx  
 Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ Code: \_\_\_\_\_  
 Name on Card: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

For more information, contact TSFA office at (512) 834-0361 or by email at txsfa@sbcglobal.net

Please return the application and registration forms to: Texas State Florists' Association, PO Box 170760, Austin, TX 78717