



Thank you for choosing Leo's Studio10 at the Peninsula Museum of Art

Leo's Studio10 Registration		
Name of Workshop/Class or Event/Rental:		
Date(s):	Time:	Fee: \$
Your Name:		
For Group Event or Space Rental: The name of your group and number of attendees expected:		
Phone:	Email:	
<p>Make checks payable to: Peninsula Museum of Art Include "Leo's Studio10" on your check memo line Registration is contingent on space available. We will notify you by email that your registration is confirmed. Payment in full is due prior to or at the beginning of the workshop or first class. Studio Rentals must be prepaid. Credit card payment can be arranged</p>		
For more information contact: peninsula.museum.edu@gmail.com		

Signature, Permissions, and Release:

_____Mark here to agree:

I agree for myself and/or on behalf of any above-indicated group, to release the Peninsula Museum of Art and Leo's Studio 10 from all liability.

Mark your choice: I DO____agree I DO NOT____agree

To allow any photographs taken of myself and/or members of our group, minors and/or otherwise, be allowed for use in promotional purposes for the Peninsula Museum of Art.

Authorized signature: _____ Date: _____

Peninsula Museum of Art, 1777 California Drive, Burlingame, CA 94010
Open Wednesday – Sunday 11 to 5

A 501c3 Not for Profit Corporation