FRIENDS OF THE REGIONAL PARKS BOTANIC GARDEN
CLASS REGISTRATION FORM

Name________________________________________      Email_____________________________________

Address_________________________________________City________________________Zipcode________

Phone________________________________

Additional Registrants

Name ___________________________________________ Email____________________________________

Name____________________________________________ Email____________________________________

#            Classes                      Cost    Subtotal

____  ______________________________________________________       _________   __________

____  ______________________________________________________       _________   __________

____  ______________________________________________________       _________   __________

____  ______________________________________________________       _________   __________

Total Cost for Classes  __________

Are you a Friends member?   Yes _____ No _____
To Join the Friends: go to http://www.nativeplants.org/support-the-garden/become-a-friend/

Pay by credit card or send a check made out to the Regional Parks Foundation

Name on Account_____________________________________(address on account must be same as above)

Credit Card # _________________________________________ Expiration Date __________

Send this form with a check or credit card information to:
Regional Parks Foundation
Friends Classes
P.O. Box 7551
Berkeley, CA 94707

****Class Fees can be refunded if a cancellation is made one week before the class except overnight
classes must be cancelled two weeks ahead.

How did you hear about our classes?
E-Newsletter ___ Class Postcard ___ Website ___ Friend ___ Flyer___ Other _______________________