

# **2018 SUMMER DEMONSTRATOR/ASSISTANT FORM**

NAME \_\_\_\_\_

AGE \_\_\_\_\_ EMAIL \_\_\_\_\_

PHONE \_\_\_\_\_

Amount of Classes: \_\_\_\_\_

Preferred studio location :

Warren Studio \_\_\_\_\_

Shelby Studio \_\_\_\_\_

Days and times available \_\_\_\_\_