

Austin Application

| First Name | | Last | Name | | | | |
|--|----------------|------|--------------------|---------------|--|--|--|
| Address | | | City, ST Zip | | | | |
| Cell: | Daytime Phone: | | | Fax: | | | |
| Email: | | | | | | | |
| I have completed the following w | | | ion (shask all t | shad annih li | | | |
| I have completed the following post-secondary education (check all that apply): | | | | | | | |
| ☐ Have not attended college | | | ☐Associate Degree | | | | |
| □Some College (Years) | | | □Bachelor's Degree | | | | |
| ☐Certification Program | | | □Master's Degree | | | | |
| ☐Private career school Certificate | | | □Other | | | | |
| If Other, please describe: | | | | | | | |
| | | | | | | | |
| Have you ever worked in the floral industry? □Yes □No | | | | | | | |
| If Yes, please describe: | | | | | | | |
| | | | | | | | |
| 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: | | | | | | |
|---|--|---------------------------------|---|----------------------------------|--|--|
| June 16-19, 2014 | | | | | | |
| Monday | Tuesday | Wednesday | | Thursday | | |
| 9:00 am – Noon | 8:30 am- Noon | 9:00 am- Noon | 8:30 am- Noon | | | |
| Basic Design | Sympathy Design | Basic Design | Floral Managem | ent | | |
| J | | | _ | of Cut Flowers and Foliage | | |
| 1:00 pm- 4:30 pm | 1:00 pm- 4:30 pm | 1:00 pm- 4:30 pm | 1:00 pm- 4:30 pr | 1:00 pm- 4:30 pm | | |
| Wedding Design | Sympathy Design | Wedding Design | Floral Management | | | |
| | | | Care & Handling | of Cut Flowers and Foliage | | |
| | | | | | | |
| June 23-26, 2014 | | | | | | |
| Monday | Tuesday | Wednesday | | Thursday | | |
| 9:00 am – Noon | 8:30 am- Noon | 9:00 am- Noon | | 8:30 am- Noon | | |
| Basic Design | Sympathy Design | Basic Design | Floral Managem | | | |
| 4.00 4.20 | 4.00 4.20 | 4.00 4.20 | | of Cut Flowers and Foliage | | |
| 1:00 pm- 4:30 pm <i>Wedding Design</i> | 1:00 pm- 4:30 pm Sympathy Design | 1:00 pm- 4:30 pm Wedding Design | 1:00 pm- 4:30 pr | | | |
| wedaing Design | Sympumy Design | vvedding Design | | of Cut Flowers and Foliage | | |
| ☐ Wedding Design Class dates: June 1 ☐ Sympathy Design Class dates: June 1 ☐ Floral Managem Class dates: June 1 | 6, 18, 23, 25 (9:00am) * 6, 18, 23, 25 (1:00pm) n* 7, 24 (all day) ent, Care & Handling o | | TSFA Mem \$275 \$300 \$300 age* \$275 | \$315 \$345 \$345 \$345 | | |
| | ls that students can us | | | | | |
| • | for <i>each</i> class registrat | • | | | | |
| | ation notice is received | I five (5) business days | | | | |
| before the start of | classes. | | | | | |
| I wish to pay by _ | CheckCre | edit Card | | | | |
| Please make chec | cks payable to Texas | State Florists' Associa | ation. | | | |
| Credit Card Billing | g:MasterCard | lVisa | DiscoverAı | mEx | | |
| Card #: | | Exp: | Code: | | | |
| | ame 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