



VIRTUAL WRITING STUDIO

VIRTUAL LIT LAB SUMMER SESSION ENROLLMENT APPLICATION/REGISTRATION FORM

"Creative Expression Begins with Your Words"

Participant Information

Name : _____
Birthday: _____
Age: _____
If minor, name of parent/guardian: _____
Address: _____
Contact #: _____
Email address: _____

Child Shirt Size: _____ Parent Shirt Size: _____ (Optional)

Why do you want to be apart of the LIT Lab Virtual Summer Session

What do you like most about writing?

Which Session(s) do you want to attend?

Poetry Writing ____ Book Writing ____ Writing with Confidence ____ Other Ideas: _____
Mandatory Sessions: Penmanship, Creative Expression and Journaling

Signature of parent/guardian over printed
name and date

Signature of Faciliator of LIT Lab Virtual

To complete your registration:
Click the Link Below to Make Your Payment
Email Completed application to: thowze83@gmail.com

Deposit: \$25.00

Final Payment due 24 hours prior to day one

Full Payment: \$50.00