
Registration/Membership Form
Course/Workshop/Program

Course/Workshop	Starting Date	Participant	Cost
Please make checks payable to: Dedham Community House	Thank you for your support!	Membership Dues: 15% discount off courses: 50% off 1 course if you bring in a new member: Total Amount Enclosed:	_____ _____ _____ _____

Your Name:

Address:

City: _____ **State:** _____ **Zip:** _____

Telephone: _____ **Email:** _____

Yes! I would like to become a member. By joining now, I will receive additional 15% off all classes and workshops. By joining now, you will receive mailings of all future classes and workshops. (Please circle one!) Individual: \$35 Family: \$50 Seniors: \$25 Sponsor: \$100 Lifetime: \$250 Benefactor: \$1000