



VIRGINIA MUSEUM OF CONTEMPORARY ART

REGISTRATION FORM

Student Name _____ Birthdate (Youth Only) _____

Parent/Guardian Name _____

Address _____

City/State/Zip _____

Day Phone/Evening Phone _____

Email _____

COURSE # _____	COURSE TITLE _____	\$ _____
COURSE # _____	COURSE TITLE _____	\$ _____
COURSE # _____	COURSE TITLE _____	\$ _____
COURSE # _____	COURSE TITLE _____	\$ _____

MOCA MEMBERS SAVE! Are you a MOCA member? **Yes** **No**

NOT A MEMBER? Why not add now and save up to \$15 on each course!

\$50 Standard Individual \$65 Household \$125 Associate

College Student/Senior/Military/Teacher Membership Discount: \$40 Discount Individual \$55 Discounted Household

Membership Fee \$ _____

Total \$ _____

PAYMENT Check (payable to MOCA) Credit Card (MasterCard/Visa/Discover)

Card # _____ Expiration Date _____

Signature _____ Approval Code _____

MOCA USE ONLY:

Date received: _____

Processed by: _____

Method of payment: _____

Added to MOCA Eshop: Membership Studio School

Return this form with payment to:

MOCA Studio School, 2200 Parks Avenue, Virginia Beach, VA 23451

Phone Registration:

Call Visitor Services 757-425-0000 x10 Monday-Friday 9am-5pm OR Saturday-Sunday 10am-4pm

Call Associate Curator of Education 757-425-0000x329 Monday-Friday 9am-5pm