

SCHOOL/GROUP APPLICATION 2024

School Name:								
Contact Name	:							
School Addres	s:							
City:		State:	State:		Zip Code:			
Phone Number: (business)			(cell)			1		
Email:		Website:	Website:					
Table Fee Bel	ow - tables will be assigned a	t random						
Standard - 2 p	eople (6 feet) - \$100 er October 31, 2023)							
Additional person Pass (max. 2) - \$25 (\$50 if after October 31, 2023)			Tabl	le Amount	\$			
			Additio	onal Pass	\$			
Name for ID Badge:		incl						
Name for ID Badge:		incl			\$			
Name for ID Bado	ge:	extra						
Name for ID Badge:		extra						
You can mak	ke payment by VENMO to @	clayconwest, o	r use one	e of the n	nethods be	low.		
Mail checks:	Clay Con West	Credit Card:	Visa	MC	Discover	Am	ex	
	c/o The Tilted Kiln		cc numb	er:				
	955 East Tabernacle		expires:				ccv code:	
	St George, UT 84770	Name on Card						
for any reason Please fill out a	accepted on a first come first ser . Payment for table and passes a application and either mail or em formation to make payment for t	are the only way to r nail application with p	eserve spo payment by	ot. / VENMO	(@clayconw	vest),		
Applicant Print Name:		Applicant Sigr	Applicant Signature:				Date:	