

**COBALT STUDIOS
SUMMER SCENE PAINTING
APPLICATION FORM**

Rec'd Date : _____

App Fee : _____

Notified: _____

NAME _____ **AGE** _____
CURRENT ADDRESS _____ **PERMANENT ADDRESS** _____

PHONE _____ **PHONE** _____
CELL _____ **EMAIL** _____

EMPLOYER _____ **CONTACT** _____
 _____ **PHONE** _____
 _____ **EMAIL** _____

EDUCATION **School** **Degree** **Date**

EXPERIENCE & EXPOSURE Include other seminars & painters or designers you have worked with
 Please attache resume if available

REFERENCES Please name an academic, a professional and a personal reference (3 total)
Name **Position** **Day Phone** **Reference Type**

What is your particular interest in this seminar? _____

Who will be responsible for payment? _____

Would you like to order a set of seven scenic brushes? (\$175 plus tax or market cost)

Yes	No
-----	----

Yes	No

Are you a smoker? _____
 Are you allergic to cats or dogs? _____
 Would you mind sharing a room? _____
 Will you be bringing a car? _____
 Do you have Food Allergies? _____
 If so, which? _____
 If so, what? _____

How did you hear about this program? _____

**Please return this application form and your \$150 non refundable application fee to
 Cobalt Studios, Inc. PO Box 79 White Lake NY 12786
 845-583-7025 * www.cobaltstudios.net**