

2000 JOHN SEXTON PHOTOGRAPHY WORKSHOPS APPLICATION

PLEASE PRINT OR TYPE

Name: Mr. Ms. \_\_\_\_\_  
 Street: \_\_\_\_\_ Mail: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
 Zip Code/Country Code: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Telephone: Work \_\_\_\_\_ Home \_\_\_\_\_ Fax \_\_\_\_\_

- Enclose a \$150 deposit, or full tuition, for each workshop desired (includes non-refundable \$100 registration fee).
- Make checks or money orders (in United States funds only) payable to: John Sexton Photography Workshops.

WORKSHOP DESIRED	DATE	FEE
<input type="checkbox"/> The Expressive Black and White Print #1	April 4-9	\$650
<input type="checkbox"/> The Expressive Black and White Print #2	April 11-16	\$650
<input type="checkbox"/> Southwest Landscape - A Sense of Place	May 14-20	\$775
<input type="checkbox"/> The Expressive Black and White Print #3	October 24-29	\$650
<input type="checkbox"/> Fine Tuning the Expressive Print	Nov. 28- Dec. 3	\$700
<input type="checkbox"/> Prerequisite Workshop: _____	Year: _____	
<input type="checkbox"/> The Expressive Black and White Print #4	February 6-11, 2001	\$650
<input type="checkbox"/> The Expressive Black and White Print #5	February 20-25, 2001	\$650
<input type="checkbox"/> Alternate workshop choice: _____		
<input type="checkbox"/> I can't attend a workshop this year. Please add me to your mailing list.		
<input type="checkbox"/> Please send more information on John Sexton's books, original photographic prints, special Limited Edition print offerings, posters and note cards.		

BACKGROUND INFORMATION (Feel free to attach a separate page with more complete information if you desire.)

Occupation: \_\_\_\_\_  
 Years involved in photography: \_\_\_\_\_  
 Equipment most often used:  35mm  2 ¼  View Camera Other: \_\_\_\_\_  
 Film types used:  Black-and-white prints  Color Prints  Color Slides Other: \_\_\_\_\_  
 Photographic Interests:  Landscape  Portrait  Architecture  Industrial  Commercial  
 Documentary Other: \_\_\_\_\_  
 Previous Classes, Workshops, Professional Experience, etc. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

List areas of special interest you would like to see covered:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What do you hope to gain from this workshop?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ACKNOWLEDGEMENT

I have read and understand the Workshop Application Procedures and Waiver of Liability and agree to be bound by them.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

MAIL TO: JOHN SEXTON PHOTOGRAPHY WORKSHOPS  
 291 Los Agrinensors  
 Carmel Valley, California 93924 USA

INQUIRIES: 831/659-3130