



INSTITUTE OF CLASSICAL
ARCHITECTURE & ART

2017 WINTER INTENSIVE

January 7 – January 14, 2017

REGISTRATION FORM

Application Instructions: Please e-mail your completed registration form to education@classicist.org. If you prefer, you may also mail your application to: The Institute of Classical Architecture & Art; attn: Education Department; 20 West 44th Street, Suite 310; New York, NY 10036.

PERSONAL DATA			
Mr./Ms./Mrs.:			
Address where you can be contacted:			
Street:			
City:	State:	Zip Code:	Country:
Home Telephone:		Business Telephone:	
Facsimile:		Email Address:	
If this address is temporary, until what date can you be reached there?			
Permanent Address (if different from above)			
Street			
City:	State:	Zip Code:	Country:
Telephone:			
ACADEMIC HISTORY			
Please list all educational institutions or programs attended following high school.			
Name of Institution	Dates Attended	Major Area of Study	Degree & Date
RELATED EXPERIENCE			
Please list all relevant work experience, awards, honors, apprenticeships, internships, commissions, etc. with dates.			
Position/Award		Dates	
General Background:			<input type="checkbox"/> AIA Member Number:
<input type="checkbox"/> Architect	<input type="checkbox"/> Fine Artist	<input type="checkbox"/> Planner	
<input type="checkbox"/> Artisan	<input type="checkbox"/> Historian	<input type="checkbox"/> Preservationist	
<input type="checkbox"/> Builder/ Tradesperson	<input type="checkbox"/> Interior Designer	<input type="checkbox"/> Student	
<input type="checkbox"/> Engineer	<input type="checkbox"/> Landscape Architect	<input type="checkbox"/> Other (Please specify):	

20 WEST 44TH STREET, SUITE 310
NEW YORK, NY 10036-6603

PHONE (212) 730-9646, EXT 116 OR 108 ~ FAX (212) 730-9649

WWW.CLASSICIST.ORG



INSTITUTE OF CLASSICAL
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REGISTRATION AND PAYMENT	
Course	Fees
Winter Intensive January 2 – January 10, 2015	
Tuition Fee:	\$1,895.00 (\$1,795.00 Members)
Total Payment:	
<input type="checkbox"/> I enclose check or money order for total shown (make check payable to: ICAA)	
<input type="checkbox"/> I hereby authorize use of my credit card (sign below)	
<input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	
Signature: _____	
Credit Card No. _____ Expires: _____	
TUITION ASSISTANCE APPLICATION	
<i>A limited amount of need-based funding for tuition only is available. Should you apply for tuition assistance, you are not required to fill out the Registration and Payment section above at the time of application.</i>	
Please note below if you are applying for funding, as well as submit the requested information with your registration form.	
<input type="checkbox"/> I am applying for tuition assistance (check if applying).	
Please indicate the amount of funding for tuition that would be required for you to attend the Winter Intensive: \$ _____. In addition, please submit a brief cover letter (no more than 500 words) detailing how much you require and why.	
If you wish, you may include information for the Tuition Assistance Committee to review that may be helpful in their decision-making process. Some possible items might include:	
1) A copy of your most recent 1040 form 2) A recent bank statement 3) A letter of reference from an organization familiar with your financial capacity	