

Registration Form

Please enroll me in the OWL-Circle Memoir Workshop, scheduled to begin:

Tuesday, March 20th at 4:30 P.M.

Hillside Fellowship Annex, 7055 Highway 281N, Spring Branch, TX

Name _____

Address _____

City _____ State _____ Zip _____

email _____

Print this form and mail with your check for \$25.00 to:

Judy Watters
2212 Whispering Water
Spring Branch TX 78070

For more info, call: 830-885-5344