APPLICATION

This application can be printed out, filled in and mailed to Gaza Bowen:

23 Mill Road, Santa Cruz, CA 95060 or
completed electronically and emailed to: gaza@gazabowen.com

Name:	Phone:	Email:	
Address:			
My classes are limited to three or fo	our people per session.		
For INTENSIVE I priority is given	to students registering for INTE	NSIVE I and INTENSIVE II.	
To help me match skill levels when	ever possible please answer the fo	ollowing questions:	
1. Do you have experience in other	crafts? pattern cutting? making th	nings?	
2. Do you know how to use a sewing	g machine? or sew by hand?		
2 Why are you interested in learning	a shaamalina?		
3. Why are you interested in learnin	g snoemaking:		
·	, –	dates? Are there other times you would b	e
available? I am fairly flexible and ca	n schedule more classes in respor	ise to interest.	
5. Will you be commuting or staying	g in Santa Cruz? Do you need mo	otel information?	
6. What is your commonly worn sho	oe size?		