



**Fire Station Artists' Studios  
Skills Programme 2014 - 2015 Booking Form**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Email: \_\_\_\_\_

**Only practicing visual artists accepted**

Your discipline (please specify):

\_\_\_\_\_

Workshop: \_\_\_\_\_

Date of workshop: \_\_\_\_\_

Please find enclosed sum of € \_\_\_\_\_ (cheques made payable to 'Fire Station Artists' Studios)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print out and return completed registration form with correct payment to:  
Office Manager, Fire Station Artists' Studios, 9-11 Buckingham Street, Dublin 1