

# Las Vegas Registration Form July 20<sup>th</sup> & 21<sup>st</sup>, 2018

Pay by credit card on website AND fax (or scan to asop.charles@gmail.com) this completed form to 727-231-8385

I will be attending the \_\_\_ Advanced Workshop \_\_\_ Basic Workshop \_\_\_ I paid online

Or mail completed form with \$550.00 check or credit card info at bottom to:

ASOP

625 6<sup>th</sup> Ave South, Suite 365

St. Petersburg, FL 33701

Registration fee does not include hotel sleeping room

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Home Tel \_\_\_\_\_ Cell# \_\_\_\_\_

\*Email \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Tel# \_\_\_\_\_ Fax# \_\_\_\_\_

Title/Certifications/State License \_\_\_\_\_

Credit Card Info

Name on card \_\_\_\_\_

Card# \_\_\_\_\_ exp date \_\_\_ / \_\_\_ CV# \_\_\_\_\_

Statement Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip code \_\_\_\_\_ Signature \_\_\_\_\_

**Fax to 727-231-8385** or email to **asop.jacob@gmail.com** to reserve your place.

Call 727-394-1700 to charge you fees.

Or pay online at [castingworkshop.com](http://castingworkshop.com) under your date and city.

Or Enclose check \$595.00 (\$550.00 IF PAID 30 OR MORE DAYS BEFORE WORKSHOP)  
and mail to:

**ASOP**

**625 6<sup>th</sup> Avenue South, Suite 365**

**St. Petersburg, FL 33701**