



236 Walnut Avenue
Lakeside, OH 43440
(419) 798-4461
(419) 798-5033 fax
www.lakesideohio.com

Lakeside Photography Workshop Registration

Wednesday, Sept. 20-Friday, Sept. 22, 2017 (Tuesday 3:00 p.m. – Thursday after lunch)

Join Sigma Pro photographer David FitzSimmons and naturalist-photographer Jim McCormac for a three-day photo workshop along the beautiful south shore of Lake Erie, exploring everything from landscapes to macro to wildlife.

Photograph sunrises, sunsets, wetlands, Lake Erie shorelines, birds, wildflowers, glacial grooves, Marblehead Lighthouse, and more. Workshop features both classroom and field sessions. Over \$500 in door prizes, too!

Registration includes six (6) meals and two (2) nights' lodging at the Fountain Inn. Space is limited – so sign up now!

To participate, complete the Photography Workshop Registration Form below and mail it with payment to: Lakeside Chautauqua, Attn: Lakeside Photography Workshop, 236 Walnut Avenue, Lakeside, OH 43440

For more information, contact (419) 798-4461, ext. 347 or programming@lakesideohio.com.

View previous workshop photos at www.facebook.com/groups/153283548350334/

Contact Information:

Name _____

Address _____

City/State/Zip Code _____

Email _____ Cell Phone _____

Registration: *before July 1:* \$590/person for single room _____ \$505/person for double room _____

after July 1: \$620/person for single room _____ \$535/person for double room _____

If double room, preferred roommate: _____

Registration (no lodging): *before July 1:* \$460/person _____ *after July 1:* \$490/person _____

Primary Interest: Landscapes _____ Wildlife _____ Macro _____ Other (specify) _____

Level of Photography Experience (please circle: 1 = low, 10 = high)

1 2 3 4 5 6 7 8 9 10

Will you bring your own camera? _____ If so, what brand? _____

How did you hear about the workshop? _____

Amount Due: _____ Checks Payable to: Lakeside Chautauqua

Name on Credit Card (please print) _____

Credit Card #: _____ Expiration Date _____ CVV Code _____

Signature _____ Date _____

Any Concerns/Special Needs _____
