



Leadership Training for Museum Professionals

**SCFM Fall 2010 Workshop
November 8, 2010
Charleston, South Carolina**

REGISTRATION FORM

Name, Title: _____

Organization: _____

Mailing Address: _____

Phone: _____ Fax: _____

Email: _____

SCFM Member ID #: _____

Registration Details:

When: Monday, November 8, 2010

Time: 9:00am-4:00pm

Where: The Charleston Museum
360 Meeting Street
Charleston, South Carolina 29403

Registration Cost: (please make checks payable to SCFM)*

\$55 SCFM members

\$75 non-members (cost includes SCFM membership)

Registration fee includes all materials and lunch

Total: _____

*If you pay via PayPal please fill out this form as well and send it to the address below.

Please return this form with payment no later than **October 22, 2010** to:

SCFM – Workshop Registration

ATTN: Zinnia Willits

Director of Collections Administration

Gibbes Museum of Art

135 Meeting Street Charleston, SC 29401