



*Please complete the form below to be considered for the Fall 2009 Experience **KNIGHT** Workshops. Fax completed form to (404) 696-7299 or scan to email and return to workshops@rossoscarknight.com subject header "experience KNIGHT form."

Note: email us your favorite photo you have taken (max resolution – jpeg - 480 x 720 pixels - 72 dpi – 200 KB)

Full Name			
Current Occupation			
Age			
Address			
Home Phone/Cell Phone			
E-mail			
Camera Type (Include lenses)			
Years in Photography:			
Do you have a website?	Yes _____	No _____	Web Address: _____
Do You Own Your Own Photography Business?	Yes _____	No _____	# of Years _____ Yearly Revenue _____
What Type of Accounting Software Do You Use?	_____		
Circle Preferred Class Date (choose 1):	Dec. 11 th : Intro to Photography \$475	Dec. 12 th : The Business of Photography \$475	Both \$950
Circle your experience in photography (5 greatest)	1-----2-----3-----4-----5		
Circle your experience in using PhotoShop(5 greatest)	1-----2-----3-----4-----5		
Why are you interested in this class?			
What do you enjoy shooting?			
How often do you shoot?			
Who's your photography hero and why?			
Do you have a manual digital SLR or will you need a rental for a digital SLR?			
What hobbies do you enjoy outside of photography?			
What is a quote, passage, verse or saying that describes you or your philosophy on life?			
What are your expectations of this class?			
Would you be interested in a welcome mixer the night before the first class or after class?	___ YES! I'd love to meet other photographers.	___ NO! I would like to experience Atlanta on my own.	___ MAYBE! It would depend on my other plans that evening.

Ross Oscar Knight Photography www.rossoscarknight.com PO Box 55023 Atlanta, GA 30308

Limited to 10 students only. Once we receive your application it will be reviewed and acceptance confirmation will be sent if you are approved. Tuition fee is due to reserve your space and is non-refundable. Further information including travel info, billing options, and agenda will be sent to approved participants only.



Credit Card Authorization Form

I, _____, hereby authorize Ross Oscar Knight Photography to charge my credit card account for the selected workshop(s).

Intro to Photography
Dec. 11th \$475

The Business of Photography
Dec. 12th \$475

Both Workshops (split pay available)
Dec. 11th & 12th \$950

VISA

MasterCard

American Express

Credit Card Number: _____

Expiration Date: ____/____/____ VID Code: _____

Credit Card Billing Address:

Street: _____

City: _____ State: _____

Zip Code: _____ - _____ Country: (if not US) _____

Telephone: () _____ - _____

_____/_____/_____
Cardholder's Signature Date

Please fax forms to: 404.696.7299