



GUILDFORD LANE GALLERY
WORKSHOP SUBMISSION

TITLE: (NAME OF WORKSHOP)

DATE: (DDMMYY to DDMMYY)

TIME:

COST (Per participant): \$

DETAILS

[name] _____

[address] _____

[email] _____

[phone] _____

WORKSHOP DETAILS

1. Description of workshop

2. List materials the instructor will provide (if applicable)

3. List materials the participants should bring (if applicable)

4. Tick the furniture required for the workshop and specify numbers

Trestle tables (900X2400)

Chairs

Projectors

Projectors Screen

Speakers

White boards

Hot water urn

DVD Player