

MURDERONE Registration

For Mail In

MurderOne for (month)_____ (title) _____
Check one: I am _____ I am not _____ a current member of KOD
Name: _____
Email address: _____ (to be used for workshop)
Payment enclosed: _____

NOTE:

****CUT-OFF DATE FOR REGISTRATION IS
the 27th day of the month PRIOR to the start of COFFIN class,
i.e. beginning COFFIN workshop date, January 1, cut-off date for registration, December 27.****

I understand that admission to the workshop depends on receipt of this form and payment fee before the cut-off date for the workshop chosen. If the payment fee is received AFTER the cut-off date, the payment fee will be returned or applied to another workshop of my choosing.

PLEASE ALSO NOTE: NON-US RESIDENTS MUST PAY BY BANK MONEY ORDER ONLY. - CHECKS OR POSTAL ORDERS WILL BE RETURNED.

FOR MURDERONE WORKSHOPS - Make checks payable to **MRSRWA** and mail to:

NOTE: you will receive an INVITATION to join the group from yahoo!groups and you MUST reply to it in order to take the course.

**MG Braden
115 Garfield St.
#2281
Sumas, WA 98265**

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