

MODEL – ART CLASSES (Please print clearly)

For payment and tax purposes, please let us know a little bit about yourself.

1. Full Name:

2. Address:

3. E-mail address:

4. Phone Number:

5. Social Security Number (SSN):

*****If you have modeled for CHAW before, write in “on-file”*****

_____ - _____ - _____

If you have any questions, please contact the Capitol Hill Arts Workshop’s bookkeeper, Theresa Moller at theresa@chaw.org.

Modeling Rate: \$20.00 per hour

Dates of Service:

_____, _____, _____, _____, _____, _____

Art Teacher Signature: _____