

# The Piedmont School of Etiquette LLC

[www.thepiedmontschoolofetiquette.com](http://www.thepiedmontschoolofetiquette.com)

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The Piedmont School Of Etiquette

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Telephone 980-819-9666

Enclosed is my check for payment for ½ or full. (\$\_\_\_\_\_)

Please reserve a place for me/son/daughter/family. My check for one-half course cost is enclosed. I will pay remaining balance before or at the first session.

Does your child (or you) have any **food allergies**? If so, please list: \_\_\_\_\_

Please circle if attendee is **Left- or Right - handed**

Donna Knorr & **PSE** have my permission to use/reproduce any photographs taken of my child / me.  
\_\_\_\_\_ YES \_\_\_\_\_ NO

## ENROLLMENT FORM

Please enroll me / son / daughter/\*family (**circle one**)

Name: \_\_\_\_\_

Course: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Course Cost: \$ \_\_\_\_\_

He/She is in the \_\_\_\_\_ grade at \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian/Adult -- Name  
\_\_\_\_\_  
\_\_\_\_\_

Address  
\_\_\_\_\_  
\_\_\_\_\_

phone

e-mail address  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Parent/Guardian/or Adult Attendee

\* If family attending, please fill out:

\*Names of those attending: (indicate **R-or L-hand, any allergies, & child's age**):