Craft Center Stony Brook University  DATE	Craft Center Stony Brook University  DATE
NAME	NAME
PHONE	PHONE
E-MAIL  Required for Brochure E-mail and Electronic Class Survey	E-MAIL
å SB Student å SB Faculty/Staff å Community Member   SB ID# []   For Student/ Faculty/Staff Discount	
NAME OF COURSE SELECTION	NAME OF COURSE SELECTION
ð CASH AMOUNT \$	ð CASH AMOUNT \$ ð CHECK #