

MISSISSIPPI AGRICULTURE AND FORESTRY MUSEUM
Folk Art Friday Adult Registration Form



Name: _____ D.O.B. ___/___/___

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Telephone: (H) (____) ____ - _____ (W) (____) ____ - _____ (C) (____) ____ - _____

Emergency contacts (Name and Phone #):

Do you give The Mississippi Agriculture and Forestry Museum permission to photograph you? Y / N Please initial: _____

If so, do you authorize The Mississippi Agriculture and Forestry Museum to use those pictures on social media? Y / N Please initial: _____

Please indicate which classes you are registering for

1/31/25: Paper Quilling

7/25/25: Paper Making

3/28/25: Cast Iron Cooking

9/26/25: Pin Cushion/Needle Book

5/30/25: Pressed Flowers

Method of Payment: Cash Credit Card Museum Foundation Member: Y / N

Museum Rep: _____ Date: _____