

# Registration for Art 384

Office of the Registrar - Luther College, Decorah, IA

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

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

ID: \_\_\_\_\_

Student Email: \_\_\_\_\_

SPO: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_

Term: \_\_\_\_\_

Year in School: 1<sup>st</sup> yr 2<sup>nd</sup> yr 3<sup>rd</sup> yr 4<sup>th</sup> yr Other: \_\_\_\_\_

I would like to register for.....

Instructor

\_\_\_\_ Eckheart

\_\_\_\_ Kamm

\_\_\_\_ Lowe

\_\_\_\_ Martinson

\_\_\_\_ Merritt

\_\_\_\_ Refsal

\_\_\_\_ Strom

\_\_\_\_ Other: \_\_\_\_\_

Area (Choose one)

\_\_\_\_ Art Education

\_\_\_\_ Book Arts

\_\_\_\_ Bronze Sculpture

\_\_\_\_ Clay Sculpture

\_\_\_\_ Design

\_\_\_\_ Drawing

\_\_\_\_ Painting

\_\_\_\_ Paper

\_\_\_\_ Photography

\_\_\_\_ Pottery

\_\_\_\_ Print Making

\_\_\_\_ Scandinavian Handcraft

\_\_\_\_ Stone Sculpture

\_\_\_\_ Watercolor

\_\_\_\_ Weaving

Number of Credits:      1      2      4

Instructor's Signature \_\_\_\_\_

*(Please return to the Registrar's Office when completed and signed.)*