

Our Membership Program \$499/Year OR \$49/Month

Includes:

* * Unlimited studio time and painting supplies anytime during our regular hours. You can bring your canvas and use our painting supplies and facility or bring your supplies anytime.

* * One free Canvas per Month included.

**One complimentary beverage of your choice per paid painting visit.

* * One "Paint & Sip" class for you.

**20% off any additional painting options
including Technical Painting Series, wine glasses, wood cut
outs, pallet boards, canvas totes, regular class and Freestyle.
**10% off gift for your Friends, Family, and your
group parties to be used on any Paint & Sip classes!
**Special discounted rates for Venue Rental

* * Must use Punch Card issued at the studio to keep up with your free canvas and class. Unused items do not roll over.



*Sign up for the **Year Membership** and receive a <u>FREE</u> <u>Studio Cellar T-Shirt or Apron!*</u>

Free monthly materials do not roll over if unused.

*Monthly membership's can be cancelled at anytime. * *No refunds, no transfers.*

To get started today, please fill out the following form and return to <u>management@studio-cellar.com</u> or call us to complete authorization and payment by phone (803)929-0709. You can also fill out information and complete transaction in person at the studio!





Please initial which membership you would like to sign up for:

____I would like to sign up for Yearly Membership. I can cancel anytime. *T-Shirt Size* _____



____I would like to sign up for Monthly Membership. I can cancel anytime.

Name of New joining Member:_____

Credit Card Info & Authorizatio Form:

Below is my correct information and authorization for a monthly payment in the amount of ________ to Studio Cellar, LLC until further notice. I understand that my card will be automatically charged on the 1st of every month. I can cancel anytime, but will not receive any refunds on completed transactions.

Name on credit card:_____

Card number:_____

Expiration date_____

CVC_____

Email for Receipt: _____

Authorization:

Print Name:

Signature and Authorization for reoccurring payments:

Date							

