



TEACHING ASSISTANT REGISTRATION FORM

First name \*

Middle (optional)  Last name \*

Company name (optional)

Street address \*

Apartment, suite, unit etc. (if applicable)

Town / City \*  State \*  ZIP Code \*

Phone \*

Email address \*

Date of birth \*

- \* I have read and agree with the NYWS Policies and Code of Conduct
- \* I attest that I am or will be 21 years or more by/before my first class

Please answer the following questions:

1. Title and Date(s) of the class you would like to function as a Teaching Assistant:

Class title:

Date(s)

- 2. Have you previously functioned as a TA at New York Wine Studio?    Yes     No
- 3. Do you have professional experience pouring wine?    Yes     No

If yes, in what capacity? (Waiter, sommelier, bartender, etc.)

4. Besides the discount, why would you like to function as a teaching assistant at NYWS?

5. If assigned as a teaching assistant for the above-mentioned class/classes, would you be able to fully perform the outlined duties and commit the required time before, during and after the class?

Yes!

Signed:

Date: