

BEGINNER / INTERMEDIATE ICON WRITING WORKSHOP

March 14-20, 2023

CASA BETANIA RETREAT CENTER
16045 COUNTY ROAD 35, Tyler, TX 75710

Instruction in the Byzantine-Russian Tradition

Principal Instructors: Tatiana & Dmitrii Berestov



Project: *Beginners students will write Archangel Michael
Or appropriate icon to their level
Intermediate students will write Sts. Peter & Paul*

Cost: Beginner = \$1,266.00 Includes 36 hrs. of studio instruction,
all art supplies, meals and room with private bath.

*NOTE: if you have not written icons with the Prosopon school or have
written less than 3 icons, you must register as a Beginner.*

Beg/Interm = \$1,353.25 Includes 36 hrs. of studio instruction,
all art supplies, meals and room with private bath.

Intermediate = \$1,091.00 - as above but student provides their
own board and art supplies.

Commuter = Subtract \$210.00 for the room with private bath.

Prices may need to be adjusted for AirFare changes.

A non-refundable, non-transferable deposit of \$200 is required to reserve a space in the class.

Please make check payable to *Teresa Darby*.

Class size is limited and reservations are on a first come, first served basis.

Deposits will be refunded if the workshop is cancelled.

Contact workshop coordinator, Teresa, for questions. (936) 585 2585 (call & text)

Mail your deposit and registration form as soon as you can.

Teresa Darby

401 County Road 212, Nacogdoches, TX 75965

Ph: (936) 585-2585 E-mail: tnddarby@swbell.net

Arrive after 4:00 pm, Tuesday, March 14, with dinner at 6:00 pm. Orientation is at 6:30 pm.

Beginners will begin class after dinner Tuesday night.

Class begins daily with prayer at 8:45 am. Wed. March 15th & ends at 5:00 pm on Monday March 20th.

Please indicate if you have any special dietary or other needs.

Shuttle from Airports and stay-over for Monday is available and costs extra.

Detach here and keep top portion for your information

Registration form: Please return with your deposit made to Teresa Darby
Prosopon Icon Workshop March 14-20, 2023

NAME _____ Beginner___ Beg/Interm___ Intermed___

ADDRESS _____ Email _____

CITY/ STATE/ZIP _____

PHONE _____ Special Needs _____

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