

# Artistic Gatherings • Class Registration Form

## Class Information

Class Title: \_\_\_\_\_ Class Type: Art Handwriting  
Age Category: Ages 4-6 Ages 7-12 Teens Adults You & Me, Kid (age 6-teen plus adult)  
Season: Summer Fall Winter Spring Year: \_\_\_\_\_  
Class Dates: \_\_\_\_\_ Day(s) of the week: \_\_\_\_\_ Time: \_\_\_\_\_  
Session Duration: 1-Day Workshop 2-Day Workshop 3-Day Workshop 10-Week Session Hourly Lessons

## Student Information

New Student  Returning Student  
Student's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
School Student Attends: \_\_\_\_\_ Grade (in or entering): \_\_\_\_\_  
Experience Level: \_\_\_\_\_  
Main result(s) desired from taking this class: \_\_\_\_\_  
*Please attach work samples &/or additional information. Indicate concerns, private matters or special requests on back ----->*

## Person Responsible for Payment

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ How'd you hear about us? \_\_\_\_\_  
Emergency Contact Info: \_\_\_\_\_

## Studio Policies

- Minors must be personally brought into the studio and personally picked up; no children running across the parking lot.
  - Full payment due when registration form is submitted. *NO Refunds or Make-Ups* unless class canceled by studio.
  - Class visitors are allowed *only* if prior payment arrangements have been made for them, and if space allows.
  - Students may *arrive no earlier than 5 minutes before class* and *leave no later than 5 minutes after class*—please!
  - Children may not bring food or drinks into the studio except during a scheduled party or out of medical necessity.
- Thank you for your thoughtfulness and for adding to the peace and well-being of everyone at the studio. We really appreciate it.*

## This Must Be Signed

I hereby hold Artistic Gatherings, Inc. and any of its employees, agents and associates harmless in the unlikely event of my or my child's injury on or about the studio's premises, and I have read and agree to all of the terms and policies described on this form.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

## Payment Information

**Save Money!** Call about sibling / multiple-session discounts before mailing your payment.

Payable to: Artistic Gatherings, Inc. • 9440 Garland Road, Casa Linda Plaza Suite 138, Dallas TX 75218

Attached: \$ \_\_\_\_\_ Cash Visa Mastercard Discover Check # \_\_\_\_\_ Gift Certificate or Discount: \_\_\_\_\_

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expires: \_\_\_\_ / \_\_\_\_ 3-digit # on back: \_\_\_\_

Billing Address (if different): \_\_\_\_\_

Name on Card: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_

**Enrollment is confirmed when form and full payment have been received.** *Thank you for choosing Artistic Gatherings.*

Artistic Gatherings, Inc. • (214) 821-8383 • e-mail: kim@artisticgatherings.com • www.artisticgatherings.com