

Registration Form (Summer 2012)
July 9, 2012 ~ August 17, 2012

Grade 4-9

Student Information

First Name Middle Last Name

Address

City State Zip Code

School Name Grade

Home Phone Number Cell Phone Number

Email

Guardian/Parent Information

First Name Middle Last Name

Address

Home Phone Number Cell Phone Number

Email

Class Schedule -Please check off the classes you would like to join

Please select:

- 10am-1pm (Grade 7-9) 12:30pm-2:30pm (Grade 4-6) 2pm-5pm (Grade 7-9) 3pm-5pm (Grade 4-6)

Please select:

- M T W Th Sa

Tuition Payment /Registration Agreement

1. Full payment of tuition is due on June 1st.
2. Once class starts, there is no refund.
3. When a student misses a class or classes due to personal reason (illness, school work, vacation, etc), there is no adjustment, nor credit, *unless* the student notifies the absence in advance; *and* missing days are made up within the summer program period (6-week). Otherwise, make up days can't be transferred to regular studio year.

Permission for use of photography

1. Ashcan Studio of Art, Inc. reserves the right to use images, for promotional materials, of all student works of art produced during a student's enrolment with us that is a result of our instruction.

I, _____, agree to the above terms of Ashcan Studio of Art, Inc.

Student/ Guardian/ Parent's signature _____ Date _____

(If student is under 18, guardian or parent must sign this form)

Date of registration _____ Advisor's Name _____