



Art Classes & Workshops

| | | | |
|----------------|-----|--|--|
| Student Name | | | |
| Address | | | |
| Address 2 | | | |
| City/State/Zip | | | |
| Home Phone | () | | |
| Email | | | |

| | | |
|-----------|-----|--------|
| Art Class | | |
| Art Class | | |
| Age / Fee | | |
| | Age | Amount |

Make all payments to:
FUNdaMENTALS Art Classes & Workshops

Parent #1

Parent #2

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------|--|--|------------|-----|--|-------|--|--|------------|--|--|---|------|--|--|------------|-----|--|-------|--|--|------------|--|--|
| <table border="1"> <tr> <td>Name</td> <td colspan="2"></td> </tr> <tr> <td>Work Phone</td> <td>()</td> <td></td> </tr> <tr> <td>Email</td> <td colspan="2"></td> </tr> <tr> <td>Occupation</td> <td colspan="2"></td> </tr> </table> | Name | | | Work Phone | () | | Email | | | Occupation | | | <table border="1"> <tr> <td>Name</td> <td colspan="2"></td> </tr> <tr> <td>Work Phone</td> <td>()</td> <td></td> </tr> <tr> <td>Email</td> <td colspan="2"></td> </tr> <tr> <td>Occupation</td> <td colspan="2"></td> </tr> </table> | Name | | | Work Phone | () | | Email | | | Occupation | | |
| Name | | | | | | | | | | | | | | | | | | | | | | | | | |
| Work Phone | () | | | | | | | | | | | | | | | | | | | | | | | | |
| Email | | | | | | | | | | | | | | | | | | | | | | | | | |
| Occupation | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | | | | | | | | | | | | | |
| Work Phone | () | | | | | | | | | | | | | | | | | | | | | | | | |
| Email | | | | | | | | | | | | | | | | | | | | | | | | | |
| Occupation | | | | | | | | | | | | | | | | | | | | | | | | | |

Please mark the appropriate box for your class selection:

Class 1- Beginning Drawing: Step by Step
\$140 All Ages: 5 & Up / 8 Weeks

Class 3- Beginning Painting: Color Excitement
\$ 180 Ages: 7 & Up / 8 Weeks

Class 2- Advanced Drawing: Representational Art
\$160 Ages: 10 & Up / 8 Weeks

Class 4- Advanced Painting: Color and Form
\$200 Ages 10 & Up / 8 Weeks

Liability Release:

The undersigned, in consideration of participation in the classes & activities, agree to indemnify and hold FUNdaMENTALS Art Classes & Workshops harmless and release FUNdaMENTALS Art Classes & Workshops of any and all liability for any injury which may be suffered by the student(s) registered in FUNdaMENTALS Art Classes & Workshops, arising out of or in any way connected with participation in the classes & activities except those arising out of the sole willful act or sole negligent act of FUNdaMENTALS Art Classes & Workshops or its employees.

I have read the above agreement, and fully understand that I assume all risks for any injury received.

I give permission to FUNdaMENTALS Art Classes & Workshops for any necessary medical care to be given to my child(ren) in case of an emergency/accident. I agree to assume full responsibility for the costs of any treatment provided.

Media Release:

I hereby consent to the use of my/my child's name, artwork, likeness and speech in any audio tape, video tape, film or photograph made in any FUNdaMENTALS Art Classes & Workshops activity for the business or publicity purposes of the FUNdaMENTALS Art Classes & Workshops and its partners. I understand that any participation offers no remuneration and that my/my child's name, artwork, likeness and speech may be edited, produced, recorded for duplication and distribution throughout the United States and abroad.

I expressly release the FUNdaMENTALS Art Classes & Workshops, its licensees, assignees, affiliates and successors from any privacy, defamation, or other claims arising out of broadcast, exhibition, publication, or promotion of this program.

- Please sign here if you do not agree to the Media Release _____

Signature _____

Date _____

Parent/ Legal Guardian Signature