

INDEPENDENCE ART STUDIOS

REGISTRATION FORM

STUDENT NAME: _____

PARENT/GUARDIAN NAME (if student is a minor): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ AGE (if minor): _____

PHONE: _____ ALT. PHONE: _____

PARENT PHONE DURING CLASS: _____

E-MAIL ADDRESS: _____

COURSE:

___ HSPVA PORTFOLIO PREP (ENTIRE COURSE = \$370. + \$30 SUPPLY FEE)

Registration deadline is Friday, October 23, 2009

___ HSPVA PORTFOLIO PREP (INDIVIDUAL CLASS SESSION = \$75)

___ HSPVA AUDITION PRACTICE WORKSHOP (ONE-DAY SESSION = \$100)

___ HOLIDAY CARD PRINTMAKING WORKSHOP (\$100)

___ WEDNESDAY NIGHT ADULT DRAWING & PAINTING (INDIVIDUAL SESSION = \$40)

Total amount enclosed: \$ _____

May we take photographs of the student and/or their artwork during classroom activities? ___ YES ___ NO

May we use those photographs for marketing and promotional purposes, in print and online? ___ YES ___ NO

Payment is due before starting any classes. We accept checks or cash only. Make checks payable to **Independence Art Studios**. Be sure to include the student's name on the check.

The class fee will be refunded if a class is cancelled by Independence Art Studios. Withdrawals from class may be made up to one week before class begins - a \$25 withdrawal fee will be deducted from your refund. No refunds will be made for withdrawals within one week of the first class or for "no shows" and withdrawals after classes begin.

I, on behalf of the student and the student's parents and guardians hereby release Independence Art Studios and Stephen and Thedra Cullar-Ledford from all actions, claims and demands for damages, loss or injury arising from any accidents which may be caused by, or arise out of the participation of the student named in any program or in any facility or at any location where a program is being held, whether or not caused by the negligence of or any of the aforesaid persons.

Signature of Parent / Guardian: _____

Print name: _____

STEPHEN OR THEDRA CULLAR-LEDFORD
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