

Kids Love Art
School of Fine Art
925-484-1378 ph & fax
info@kidsloveart.com

1989-G Santa Rita Road
Pleasanton, CA 94566
www.KidsLoveArt.com

Registration Form

Student(s) Name	Age / Birthday	Class/day/time

Parent/Guardian _____

Address _____

City _____ State _____ Zip _____ Home Ph# _____

Daytime or Cell Ph# _____ email _____

Can we email you our newsletter : yes no

Please complete the registration form and read the class policy and procedures. Make checks payable to Kids Love Art.

Application fee: \$20 (one time only)

Tuition: \$_____ for a series of ___ classes, **Summer 2010 semester**

Total: \$_____ paid in full

\$_____ installment 1 _____ date \$_____ installment 2 _____ date

Emergency information must be provided before a minor attends class.

Family Doctor _____ Ph# _____

Any Allergies _____

Emergency Contact _____ Ph# _____

I hereby give the staff of Kids Love Art permission to see that the above named minor receives treatment in case of an emergency. **Please turn over to sign release agreement.**

Signature

Date

Where did you hear of our school? _____

Which school does your child attend? _____

Policies and Procedures

In consideration to other students, please be prompt to class. Parents are not allowed to sit in on the classes. You can request to stay a few minutes on the first day of class to make sure your child feels comfortable. Please do not drop off your child more than 5 minutes early to class and pick them up promptly afterwards. There is a 5 minute grace period for picking up your child. Anytime beyond this, a fee of \$1 per minute will be charged. To maintain a peaceful and productive studio environment, I ask students to observe a few golden rules. _____ **Initial**

1. No talking when the teacher is talking.
2. Try your best to concentrate on the project at hand.
3. Keep your hands to yourselves and your work.
4. Clean up after yourselves.
5. Strive for positive attention from the teacher
6. Respect each other; for example, say nice things to one another.
7. Minimize conversations while doing art work.

Tuition and cancellation policy

The payment is required to secure enrollment. You are allowed to drop the class for a pro rated refund before the beginning of the 3rd class, after the 3rd class, 50% of the pro rated tuition is refunded. Make ups are done the week before or after date of absence within the SAME SEMESTER. Please refer to make up table in Appendix A for details. There is a \$25 bounced check fee.

Release Agreement

I certify that I have full authority to enroll my child(s) in the art program, to authorize participation in activities, to grant authority for medical care.

I hereby release Kids Love Art Inc, and their instructors from any and all liabilities for any loss, personal injury, property damage that may have arisen out of or in any way connected with my child's participation in any activity supported and connected with the art program. I understand that during classes, photographs or video may be taken. These photographs or video are used for marketing materials (flyer, DVD, online video) and promotional purpose.

This release agreement constitutes the full understanding of the parties and cannot be modified except in writing and signed by the parties.

Please sign below to indicate that you have read and agree to the Release Agreement described above.

Parent/Guardian Name (print) : _____

Signature : _____

Appendix A

The number of makes up for school year semester programs.

Number of classes enrolled	Number of make ups allowable within same semester
12 - 10	3
9 - 7	2
6 - 4	1

Make ups are done the week before or after date of absence within the SAME SEMESTER. Please call to arrange the schedule for the make ups.