

Studio Arts

Registration Form (Must accompany payment)

**Please remember your space in our program is only set once payment is received!
Please don't disturb a class in session!**

Student Name _____ Class Date/Time _____ \$ _____

Age _____ Birth Date _____ Camp/Class Title _____ \$ _____

Student Name _____ Class Date/Time _____ \$ _____

Age _____ Birth Date _____ Camp/Class Title _____ \$ _____

Student Name _____ Class Date/Time _____ \$ _____

Age _____ Birth Date _____ Camp/Class Title _____ \$ _____

Summer lunch supervision add (\$35) \$ _____

Full Payment/Total Enclosed \$ _____

Payment Method - check one: Full payment enclosed with cash or check or Send me a Paypal invoice

- cash/check (mailed or dropped in secure silver mail slot just to the left on wall by front door.)
- request a Paypal invoice be sent to you for payment by credit card, debit card or Paypal (invoiced only after this form received via email or placed in drop box)

All Parents/Guardians Full Names and emergency phone numbers:

_____ # _____

_____ # _____

Email: _____

Paypal Email: _____

What school does your child attend? _____

First Visit? Yes No

I have read the [FAQ \(studioartsdallas.com/faq/\)](http://studioartsdallas.com/faq/) and understand all studio policies. I understand there are no refunds or rescheduling of camps/classes for any reason. I have enclosed information to assist the teacher regarding my child's learning differences/allergies, etc.

I have read and understand the above (please sign) _____

StudioArtsDallas.com

10051 Shoreview Rd. Dallas, Texas 75238

no phone messages returned - email only info@studioartsdallas.com