

# REGISTRATION

# Summer '15

Please fill out all requested information and print clearly. Siblings may use a single form.

Student name(s) \_\_\_\_\_

Age(s) \_\_\_\_\_ Birth date(s) \_\_\_\_\_

Student status (circle one) Currently enrolled / Returning / New to ArtWorks\*\*

If new to ArtWorks how did you hear about us? \_\_\_\_\_

School(s) student(s) attends(s) \_\_\_\_\_

Parent name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Daytime phone 1 \_\_\_\_\_ Daytime phone 2 \_\_\_\_\_

Email address \_\_\_\_\_

Emergency contact \_\_\_\_\_

Enclosed is my check in the amount of \$ \_\_\_\_\_ for \_\_\_\_\_ workshop(s)/camp(s).

\*\* If you are new to ArtWorks, please remember to include the \$15 Registration fee.

## PROGRAM DATES AND COURSE CHOICE

Circle the workshop or camp you are enrolling in.

- |                |   |
|----------------|---|
| June 8–12      | Art Camp 2 <u>OR</u> Art Camp 4 <u>OR</u> Drawing                   |
| June 15–19     | Art Camp 1 <u>OR</u> Cartooning <u>OR</u> Mixed Media Sculpting     |
| June 22–26     | Art Camp 2 <u>OR</u> Art Camp 3 <u>OR</u> Drawing                   |
| June 29–July 3 | No Classes  |
| July 6–10      | Art Camp 1 <u>OR</u> Cartooning <u>OR</u> Drawing                   |
| July 13–17     | Art Camp 4 <u>OR</u> Portfolio Prep <u>OR</u> Mixed Media Sculpting |
| July 20–24     | Art Camp 2 <u>OR</u> Art Camp 3 <u>OR</u> Cartooning                |
| July 27–31     | Art Camp 1 <u>OR</u> Art Camp 3 <u>OR</u> Drawing                   |
| August 3–7     | No Classes  |
| August 10–14   | Art Camp 4 <u>OR</u> Cartooning <u>OR</u> Mixed Media Sculpting     |

If you would like to pay by credit card, please call our office. If paying by check, please make checks payable to ArtWorks and mail to:

360-E West Portal Avenue, San Francisco, CA 94127

For office use only:

Amount \$ \_\_\_\_\_

Invoice sent \_\_\_\_\_

Bal Due \$ \_\_\_\_\_

Ck # \_\_\_\_\_ / CC / \$

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Ck # \_\_\_\_\_ / CASH

\$0 Bal

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_