



ART Maniac

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Kids Art Class Registration Form

Student Name: _____ Age: _____ Birthday: _____

Student Name: _____ Age: _____ Birthday: _____

Parent Name: _____ Cell Phone: _____

Home Phone: _____

Email/s: _____

Billing Information:

Name: _____

Address: _____

City/State: _____ Zip Code: _____

Does your child have any disabilities that we should be aware of? If so, please explain: no / yes

Does your child have any allergies, especially to any food? If yes, please list: no / yes

Will your child take any medications while in our care? If so, please list and write any instructions: no / yes

Please write any other special instructions that you would like us to know:

In case of an Emergency call:

Name: _____ Relation: _____ Phone: _____

I have read and understand all the guidelines within the Enrollment Agreement and agree to its terms. I certify that all the above information is accurate and understand that if case of any inaccuracies, ART Maniac has the right to discontinue classes and withdraw my student from the program.

Parent Signature: _____ Date: _____

Kids Art Class Enrollment Agreement

Welcome to ART Maniac! Thank you for choosing us to guide your young artist along their journey to creativity. We at ART Maniac are committed to the highest standards in Art Education, and will work with each and every artist in developing their skills in addition to shaping their understanding of Art.

Please read the following Enrollment Agreement and initial each section to indicate that you have read, understand, and agree to the terms of Enrollment. If you have any questions, please contact us. Thank you!

Scheduling: Our lessons are 1.5-hour classes once a week on the day that you choose. Sessions will have a maximum of 10 students to one instructor to ensure maximum learning and fun. Any of the class sessions may be chosen based on availability, and each class time will be reserved when the class tuition payment is made in full. Initials: _____

Tuition: A tuition payment of \$40.00 for a 1.5-hour class per student is due at the time of booking. Tuition prices are non-negotiable. We currently take personal checks, cash, and credit card payments via PayPal for your convenience. There will be a \$35.00 fee for returned checks. Book 10 classes and the 11th class will be free of charge! Initials _____

Missed Classes / Cancellations / No Shows: If a student cannot attend a scheduled, paid class, we do offer one make up class a month if the class is canceled at least 24 hours in advance. This make up class can be scheduled with a staff member for another class session depending on availability. All make up classes must be made up within one month of the missed class and cannot be applied towards a future class or camp. If we do not receive advance notice of a cancellation, we will not be able to offer a make up class, and the absence will be considered a no show. Initials _____

Supplies: Class tuition covers basic art materials used during class sessions, such as paper, pencils, canvas, paint, fabric, thread, yarn, knitting needles. We will let you know in advance if an extra fee is needed for special projects. Initials: _____

Time Management: Each class will begin and end promptly at their scheduled times. Please make sure that students are not dropped off earlier than 5 minutes before their class time and are picked up promptly after each class session. Although most parents drop off/pick up, parents may stay for the duration of a class, but we request that they wait quietly in the lounge area of the studio. Initials: _____

Refunds and Withdrawals: Payments for classes are not refundable. Exceptions can be made if we receive notice prior to a student's first class. If a student unexpectedly needs to withdraw from our program, we can decide to apply any unused portion of their tuition towards another date or an art camp as long as it is within 6 months of withdrawal and cannot be transferred to another student. We at ART Maniac reserve the right to withdraw a student from the program for behavior that may detrimental to our learning environment – in this case, we will issue a refund of any unused portion of the tuition. Initials: _____

I have read and agree to all the terms listed in this Enrollment Agreement.

Student Name: _____

Parent Name: _____ Signature: _____ Date: _____

WAIVER OF LIABILITY, MEDICAL RELEASE, PHOTOGRAPHY/VIDEO RELEASE & INDEMNIFICATION AGREEMENT

I hereby **waive**, **release** and **discharge** any and all claims and damages for personal injury, death, or property damage which I, or my minor children, may sustain or which may occur as a result of my own participation, or that of my minor children, in **ART Maniac** classes, camps, parties, and other activities.

I further understand and agree that:

1. This release is intended to discharge in advance ART Maniac, its owners, employees and agents from and against any and all liability, except for their sole negligence or intentional acts, connected in any way with my participation or my minor children's participation in ART Maniac activities;
2. Such classes and activities may be of a hazardous, strenuous, and/or physical nature, and participation in said activities may result in injury, death or property damage
3. The use of equipment and materials includes, but is not limited to, sewing machines, sewing pins and needles, knitting needles, box cutter knives, hammers, screwdrivers, jigsaws, electric sanders, hot glue guns. ART Maniac will provide instructions on how to use the equipment, and I and/or my minor children will be prepared to listen carefully to the instructions and will take all necessary steps to keep myself and/or himself/herself safe;
4. Knowing the risk involved, nevertheless, I voluntarily request permission for myself or my minor child to participate in said activities;
5. I hereby assume any and all risks of injury, death or property damage and to release and hold harmless ART Maniac, its owners, employees & agents, except for their sole negligence or intentional acts;
6. This waiver, release and assumption of risk is binding on me and my heirs and assigns;
7. I will indemnify and hold ART Maniac harmless from any loss, liability, damage, cost or expense, including litigation, which it may incur as a result of any injury and/or property damage which myself or my minor children may sustain while participating in said activities;
8. I will compensate any loss, damage, or cost ART Maniac may incur if any litigation arises due to any claim made by myself, said minors, or by anyone on said minor's behalf;
9. In the event that said minor requires medical or surgical treatment while under the supervision of ART Maniac personnel in connection with said activities, such supervisor may authorize treatment;
10. I will pay all medical, hospital, or other expenses which I or my minor children may incur as a result of such treatment;
11. ART Maniac is not responsible for unattended children on the premises before or after classes for which they are enrolled;
12. I expressly allow, and hereby waive any objection to, ART Maniac photographing and/or videotaping of me and/or my minor children when I and/or my minor children are participating in ART Maniac programs;
13. I understand and agree that all photographs and videotapes will remain the property of ART Maniac, and that ART Maniac may use such photographs or videotapes for archival and promotional purposes, including their use in ART Maniac brochures, other printed materials, on ART Maniac's online web pages and social media. ART Maniac will take all necessary precautions to keep names and ages of participants confidential unless otherwise requested.

I certify that I have custody or am the legal guardian of said minors by court order, and that I and my minor children are physically able to participate in the described activities.

I have carefully read this Waiver of Liability, Medical Release, Photography/Videotape Release and Indemnification Agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and ART Maniac, and that I sign it of my own free will.

Student(s) Name(s): _____

Parent/Guardian Name: _____

Parent Signature: _____ Date: _____