



the sewing project  
Sewing school  
7/8/9 club

## Student Registration

Students Name: \_\_\_\_\_

Parents Name/s: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home # \_\_\_\_\_ Cell# \_\_\_\_\_

(Please let me know which one is checked more often)

Students Birthday: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/s Email: \_\_\_\_\_ (One Checked Often)

Students Email: \_\_\_\_\_

### **HOLD HARMLESS AGREEMENT/Photo Release for the sewing project**

I understand the sewing instructor/s will do their best to prevent an accident from occurring, however, I the undersigned, agrees to hold Connie Tkach and the other instructors harmless for any accident that may occur to myself or my child while attending or in the process of attending sewing class, and while attending any sewing activities held by the sewing instructor/s. \*\*Photo Release; I give my permission to use the photos taken in class for promotion and sharing of the sewing project sewing school, to others. \*\*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Tuition is due by the 1<sup>st</sup> of each month. Online payment or before class. Cash/Checks and credit/debit is accepted