



the sewing project, sewing school

## Student Registration

School Year: \_\_\_\_\_ October-May

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

Parents Name/s: \_\_\_\_\_ (if 17yrs under)

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

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

Phone/Cell# \_\_\_\_\_

Students Birthday: \_\_\_\_\_ age: \_\_\_\_\_

Parent/s Email \_\_\_\_\_ (one checked \*often and under 18yrs old)

Students Email \_\_\_\_\_ (one checked \*often)

\*\*\*Tuition is due by the 1st of each month. Online tuition payment by credit or debit card or cash/checks are accepted\*\*\*

### **Hold Harmless Agreement/Photo Release for: the sewing project sewing school**

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, at events, social media etc.

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